Edgar Filing: Tufts Robert R. - Form 4

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Form 4										
January 05, 2010							OMB A	OMB APPROVAL		
FORM 4	UNITED STA	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						3235-0287		
Check this box if no longer subject to Section 16. Form 4 or	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES						Estimated burden hou	Expires: January 31 2009 Estimated average burden hours per response 0.9		
Form 5 obligations may continue. <i>See</i> Instruction 1(b).							·			
(Print or Type Respon	ises)									
1. Name and Address Tufts Robert R.	Symbol	2. Issuer Name and Ticker or Trading Symbol NovaBay Pharmaceuticals, Inc.			5. Relationship of Reporting Person(s) to Issuer					
	NovaBa [NBY]	y Pharma	iceutical	s, Inc.	(Check all applicable)					
(Last) (C/O NOVABAY PHARMACEUT HORTON STRE	ICALS, INC., 5	(Month/D 01/04/20	-	ansaction		X Director Officer (giv below)		% Owner her (specify		
			4. If Amendment, Date Original Filed(Month/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting				
	State) (Zip)	Tabl	a I. Nam D	· · · · · · · · · · · · · · · · · · ·	S	Person	ef en Den eficie	ller Oren ed		
1.Title of 2. Tra	nsaction Date 2A. th/Day/Year) Exe any	Deemed cution Date, if nth/Day/Year)	3. Transactior Code	4. Securit: Acquired Disposed (Instr. 3, 4	ies (A) or of (D)	Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect		
Reminder: Report on	a separate line for e	each class of secu	rities benefi	icially own	ned directly	or indirectly.				

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amour or Numbe of Shar
Common Stock (1)	\$ 2.02	01/04/2010		А	25,658	01/04/2010(2)	01/04/2020	Common Stock	25,65

Reporting Owners

Reporting Owner Name / Address	Relationships				
	Director	10% Owner	Officer	Other	
Tufts Robert R. C/O NOVABAY PHARMACEUTICALS, INC. 5980 HORTON STREET, SUITE 550 EMERYVILLE, CA 94608	Х				
Signatures					
/s/ Theresa Granados, Attorney-in-Fact for Rober Tufts	t R.	01/05/	2010		
**Signature of Reporting Person		Dat	e		

Explanation of Responses:

- * If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) Granted Persuant to the Novabay Pharmaceuticals, Inc. Director Compensation Plan.
- (2) Stock Option will vest in equal monthly installments over one year starting from the date of the grant.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.