

ConforMIS Inc
Form 3
June 30, 2015

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,
Section 17(a) of the Public Utility Holding Company Act of 1935 or Section
30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name and Ticker or Trading Symbol	
FALLON KENNETH P III		(Month/Day/Year)	ConforMIS Inc [CFMS]	
(Last)	(First)	(Middle)	06/30/2015	
C/O CONFORMIS, INC., 28 CROSBY DRIVE			4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
(Street)				
BEDFORD, MA 01730			(Check all applicable)	6. Individual or Joint/Group Filing(Check Applicable Line)
(City)	(State)	(Zip)	<input checked="" type="checkbox"/> Director <input type="checkbox"/> 10% Owner	<input checked="" type="checkbox"/> Form filed by One Reporting Person
			<input type="checkbox"/> Officer <input type="checkbox"/> Other	<input type="checkbox"/> Form filed by More than One Reporting Person
			(give title below)	(specify below)

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

SEC 1473 (7-02)

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

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect (I)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable Expiration Date	Title Amount or Number of Shares			

(Instr. 5)

Stock Option (right to buy)	Â (1)	04/10/2016	Common Stock	25,000	\$ 0.6	D	Â
Stock Option (right to buy)	Â (2)	09/11/2016	Common Stock	55,000	\$ 0.6	D	Â
Stock Option (right to buy)	Â (3)	12/01/2019	Common Stock	25,000	\$ 4.32	D	Â
Stock Option (right to buy)	Â (4)	03/29/2021	Common Stock	25,000	\$ 4.32	D	Â
Stock Option (right to buy)	Â (5)	05/11/2022	Common Stock	25,000	\$ 5.5	D	Â
Stock Option (right to buy)	Â (6)	08/03/2024	Common Stock	12,500	\$ 8.96	D	Â
Stock Option (right to buy)	Â (7)	08/03/2024	Common Stock	12,500	\$ 10.96	D	Â
Stock Option (right to buy)	Â (8)	01/12/2025	Common Stock	12,500	\$ 10.96	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
FALLON KENNETH P III C/O CONFORMIS, INC. 28 CROSBY DRIVE BEDFORD, MA 01730	Â X	Â	Â	Â

Signatures

/s/ Lan Marinelli,
Attorney-in-Fact

06/30/2015

__Signature of Reporting Person

Date

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 5(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) This option is fully vested.

(2) This option is fully vested.

(3) This option is fully vested.

(4) This option is fully vested.

(5) This option is fully vested.

(6) This option was granted on August 4, 2014 and vests over two years, with 4.1666% of the shares underlying the option vesting monthly after June 10, 2014.

(7)

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This option was granted on August 4, 2014 and vests over two years, with 4.1666% of the shares underlying the option vesting monthly after June 10, 2014.

- (8) This option was granted on January 13, 2015 and vests over one year, with 8.3333% of the shares underlying the option vesting monthly after January 13, 2015.

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Remarks:

Exhibit 24 - Power of Attorney

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.