Edgar Filing: Clemmer James C - Form 4

Clemmer Ja Form 4	mes C										
July 21, 2017 FORM 4 LINITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL		
Check th	Washington, D.C. 20549								3235-0287		
Form 5 obligatic may con	ger o STATEN 16. or Filed pur	suant to Section a) of the Public	F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Section 16(a) of the Securities Exchange Act of 1934, Public Utility Holding Company Act of 1935 or Section					Expires: January 31, 2005 Estimated average burden hours per response 0.5			
<i>See</i> Instruction 30(h) of the Investment Company Act of 1940 1(b).											
(Print or Type	Responses)										
1. Name and A Clemmer Ja	Address of Reporting ames C	Symbo	2. Issuer Name and Ticker or Trading Symbol ANGIODYNAMICS INC [ANGO]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last)	(First) (1	· · · · · · · · · · · · · · · · · · ·					X_ Director 10% Owner				
14 PLAZA		(Month/Day/Year) 07/20/2017				XOfficer (give titleOther (specify below) below) President and CEO					
	(Street) 4. If Amendment, Date Original Filed(Month/Day/Year)				l		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
LATHAM,	NY 12110						Form filed by M Person	lore than One Re	porting		
(City)	(State)	(Zip) Ta	ble I - Non-	Derivative	Securi	ties Acqu	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, i any (Month/Day/Yea	Code (Instr. 8)	4. Securit ion(A) or Di (Instr. 3, - 7 Amount	sposed	of (D)	5. Amount of 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 Beneficial Ownership (Instr. 4)		
Common Stock	07/20/2017		Р	20,000		\$ 15.64 (1)	86,683	D			
Common Stock	07/21/2017		Р	5,000	А	\$ 15.79	91,683	D			

Reminder: Report on a separate line for each class of securities beneficially owned 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.

Edgar Filing: Clemmer James C - Form 4

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

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

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. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Under Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

er

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Clemmer James C 14 PLAZA DRIVE LATHAM, NY 12110	Х		President and CEO				
Signatures							
/s/ Stephen A. Trowbridge, Att in Fact	corney	07.	/21/2017				
**Signature of Reporting Person			Date				

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).

The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$15.54 to \$15.70, inclusive. The reporting person has provided to AngioDynamics, Inc., and undertakes to provide to any security holder

(1) s15.54 to \$15.76, inclusive. The reporting person has provided to AngroDynamics, inc., and undertakes to provide to any security notice of AngroDynamics, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote 1.

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.