PECK WILLIAM A

Form 4

November 13, 2017

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB APPROVAL OMB** 

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Form 5 obligations may continue. See Instruction

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \*

PECK WILLIAM A

2. Issuer Name and Ticker or Trading

Symbol

ALLIED HEALTHCARE PRODUCTS INC [AHPI]

5. Relationship of Reporting Person(s) to

Issuer

(Check all applicable)

(Last)

(First)

(Middle)

3. Date of Earliest Transaction

(Month/Day/Year) 11/09/2017

X\_ Director 10% Owner

Officer (give title below)

Other (specify

ONE BROOKINGS DRIVE, CAMPUS BOX 1159

> (Street) 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

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

ST. LOUIS, MO 63130

Security

(Instr. 3)

(City) (State) (Zip) 1. Title of 2. Transaction Date 2A. Deemed

(Month/Day/Year)

(Month/Day/Year) Execution Date, if

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 3, 4 and 5) (Instr. 8)

5. Amount of Securities Beneficially Owned Following

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial Ownership (I) (Instr. 4) (Instr. 4)

Reported Transaction(s) (Instr. 3 and 4)

Code V Amount (D) Price

(A)

or

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

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

3. Transaction Date 3A. Deemed 1. Title of (Month/Day/Year) Execution Date, if Transaction of Conversion

5. Number 6. Date Exercisable and **Expiration Date** 

7. Title and Amount of 8. I Underlying Securities

#### Edgar Filing: PECK WILLIAM A - Form 4

Security (Instr. 3)	or Exercise Price of Derivative Security	any (Month/Day/Year)	Code (Instr. 8)	Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	(Month/Day/Year)		(Instr. 3 and 4)		Sec (Ins
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Option to purchase common stock	\$ 8.1				11/13/2009	11/13/2018	Common stock	750	
Option to purchase common stock	\$ 10.08				11/13/2010	11/13/2019	Common stock	750	
Option to purchase common stock	\$ 8.68				11/11/2011	11/11/2020	Common stock	750	
Option to purchase common stock	\$ 7.1				11/10/2012	11/10/2021	Common stock	750	
Option to purchase common stock	\$ 5.18				11/08/2013	11/08/2022	Common stcok	750	
Option to purchase common stock	\$ 4.62				11/14/2014	11/16/2023	Common stock	750	
Option to purchase common stock	\$ 3.16				11/13/2015	11/13/2024	Common stock	750	
Option to purchase	\$ 2.34				11/12/2016	11/12/2025	Common stock	750	
Option to purchase	\$ 2.26				11/10/2017	11/10/2026	Common stock	750	
Option to purchase	\$ 2.22	11/09/2017	A	750	11/09/2018	11/09/2027	Common stock	750	\$

# **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

PECK WILLIAM A ONE BROOKINGS DRIVE CAMPUS BOX 1159 ST. LOUIS, MO 63130

X

## **Signatures**

William A. Peck 11/13/2017

\*\*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).
- (1) Issued pursuant to the Company's 2013 Director's Stock Option Plan.

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.

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