## Edgar Filing: Trowbridge Stephen A - Form 4

Trowbridge S	Stephen A										
Form 4											
April 25, 201	.8										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB AF	OMB APPROVAL	
	UNITE	D STATES		ITIES A nington,			NGE C	COMMISSION	OMB Number:	3235-0287	
Check thi	or								Expires:	January 31,	
if no longer subject to STATEMENT OF CHAN				GES IN BENEFICIAL OWN				NERSHIP OF	Estimated a	2005 Laverage	
Section 16.				SECURITIES					burden hours per		
Form 4 or Form 5			1	$(\cdot) \cdot f(t)$	G	F		- 1	response	0.5	
obligation	• · · · ·						-	e Act of 1934, 1935 or Sectior			
may cont	inue.		of the Inv	•	•	· ·			1		
See Instru 1(b).	iction	50(II)	or the my	estinent	compan	y ne	101174	10			
(Print or Type F	Responses)										
Trowbridge Stephen A Symbol				2. Issuer Name <b>and</b> Ticker or Trading mbol NGIODYNAMICS INC [ANGO]				5. Relationship of Reporting Person(s) to Issuer			
		(A.C. 1.11.)						(Checl	k all applicable	.)	
				te of Earliest Transaction			Director	10%	Owner		
			04/24/20	th/Day/Year) 4/2018			Diffector X Officer (give		er (specify		
			0 11 2 11 20	10				below) SVP and	below) I General Coun	sel	
	(Street)		4. If Amen	dment. Dat	te Original			6. Individual or Jo			
				Ionth/Day/Year)				Applicable Line)			
								_X_ Form filed by C			
LATHAM,	NY 12110							Form filed by M Person	lore than One Re	porting	
(City)	(State)	(Zip)	Table	I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction D	ate 2A. Deer	ned	3.	4. Securit	ties Ad	cquired	5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Year) Execution Date, if			Transaction(A) or Disposed of (D)				Securities Beneficially	Form: Direct		
(Instr. 3)		any (Month/Day/Y			Code (Instr. 3, 4 and 5) Year) (Instr. 8)					Beneficial Ownership	
			Jay/ I Cal)	(111501.0)				Owned Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported			
						or		Transaction(s) (Instr. 3 and 4)			
2				Code V		(D)	Price	(msu. 5 anu 4)			
Common Stock	04/24/2018			F	1,280 (1)	D	\$ 19.76	33,172	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.

 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)	4. Transacti Code (Instr. 8)	5. oriNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,	6. Date Exercisable and Expiration Date (Month/Day/Year)		Amou Unde Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## Edgar Filing: Trowbridge Stephen A - Form 4

## **Reporting Owners**

Reporting Owner Name / Address			Relationships			
	Director	10% Owner	Officer	Other		
Trowbridge Stephen A 14 PLAZA DRIVE LATHAM, NY 12110			SVP and General Counsel			
Signatures						
/s/ Stephen A. Trowbridge	04/25/2018					
**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) The exempt disposition of 1,280 shares of common stock of AngioDynamics, Inc. was made to satisfy tax withholding obligations in connection with the pre-determined vesting of shares underlying restricted stock units granted to the reporting person on April 24, 2015.

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.