GOVIL ARON Form 3 April 02, 2018

FORM 3

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

OMB APPROVAL

OMB Number:

3235-0104

Expires:

January 31, 2005

0.5

Estimated average burden hours per

response...

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 2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol Person * Statement VICON INDUSTRIES INC /NY/ [VII] GOVIL ARON (Month/Day/Year) 03/23/2018 (Last) (First) (Middle) 4. Relationship of Reporting 5. If Amendment, Date Original Person(s) to Issuer Filed(Month/Day/Year) 19 ENGINEERS LANE (Check all applicable) (Street) 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Director _X__ 10% Owner _X_ Form filed by One Reporting Officer __X__ Other Person FARMINGDALE, NYÂ 11735 (give title below) (specify below) Form filed by More than One See Explanation of Response Reporting Person (City) (State) (Zip) Table I - Non-Derivative Securities Beneficially Owned 2. Amount of Securities 4. Nature of Indirect Beneficial 1. Title of Security Beneficially Owned Ownership (Instr. 4) Ownership (Instr. 4) Form: (Instr. 5) Direct (D) or Indirect (I) (Instr. 5) Ι COMMON STOCK (1) (2) 7,284,824 See Footnote (3) Reminder: Report on a separate line for each class of securities beneficially SEC 1473 (7-02)

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

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

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Shares (I)

(Instr. 5)

WARRANT (1) (2) 04/20/2017 04/20/2020

COMMON STOCK

1,500,000 \$ 0.4

I See Footnote (3)

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

GOVIL ARON

19 ENGINEERS LANE Â X Â See Explanation of Response

FARMINGDALE, NYÂ 11735

Signatures

/s/ Aron Govil 04/02/2018

**Signature of Date
Reporting Person

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).

The Reporting Person is a member of a Section13(d) group that owns in the aggregate more than 10% of the Issuer's outstanding shares of Common Stock as disclosed in a Schedule 13D, filed on behalf of the Reporting Person and certain other stockholders of the Issuer on

- (1) April 2, 2018, as amended. As such, the Reporting Person may be deemed to beneficially own more than 10% of the Issuer's outstanding shares of Common Stock. The securities reported herein do not include any securities held by any group member other than the Reporting Person, as such shares are being reported in a separate Form 3 filing.
 - The Reporting Person disclaims beneficial ownership of the shares of Common Stock except to the extent of his pecuniary interest
- (2) therein, and this report shall not be deemed to be an admission that the Reporting Person is the beneficial owner of such shares of Common Stock for purposes of Section 16 or for any other purpose.
- Represents securities beneficially owned by Cemtrex, Inc. ("Cemtrex"). The Reporting Person is the controlling shareholder and
- (3) Executive Director of Cemtrex. By virtue of these relationships, the Reporting Person may be deemed to beneficially own the securities owned directly by Cemtrex.

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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