SUTRON CORP Form 5 August 05, 2014

FORM 5

OMB APPROVAL

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

OMB 3235-0362 Number:

no longer subject to Section 16. Form 4 or Form 5 obligations may continue.

Check this box if

January 31, Expires: 2005 Estimated average

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

burden hours per response... 1.0

See Instruction Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, 1(b). Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section Reported

Form 4

30(h) of the Investment Company Act of 1940

Transactions Reported

1. Name and Address of Reporting Person * 2. Issuer Name and Ticker or Trading 5. Relationship of Reporting Person(s) to Issuer McQuivey Raul S Symbol SUTRON CORP [STRN] (Check all applicable) (Last) (First) (Middle) 3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) _X_ Director _X__ 10% Owner 12/31/1999 _X_ Officer (give title _ Other (specify below) below) 22400 DAVIS DRIVE Chairman, President, CEO (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Reporting Filed(Month/Day/Year)

(check applicable line)

STERLING, Â VAÂ 20164

(Zin)

(City)

X Form Filed by One Reporting Person Form Filed by More than One Reporting Person

(City)	(State)	(Zip) Tab	le I - Non-Dei	rivative Secu	ırities	Acquii	ed, Disposed o	f, or Beneficia	ally Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securitie (A) or Disp (Instr. 3, 4)	osed c	of (D)	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	Ownership Form:	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	04/06/1999	Â	J4	360,000	D	\$ <u>(1)</u>	757,026	D	Â
Common Stock	04/06/1999	Â	J4	360,000	A	\$ <u>(1)</u>	757,026	I	By Raul S. McQuivey Trust dated 3/24/1999
Common Stock	04/06/1999	Â	J4	359,586	D	\$ <u>(1)</u>	757,026	D	Â

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	Common Stock	04/06/1999	Â	J4	359,586	A	\$ <u>(1)</u>	757,026	I	By Karen T. McQuivey Trust dated 3/24/1999
	Common Stock	04/06/1999	Â	J4	6,186	D	\$ (1)	757,026	D	Â
	Common Stock	04/06/1999	Â	J4	6,186	A	\$ (1)	757,026	I	By Trust
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.				•			ection of info quired to resp		SEC 2270 (9-02)	

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

the form displays a currently valid OMB control number.

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. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. of D Se B O En Is Fi
					(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
noporous o mior ramio, raminoso	Director	10% Owner	Officer	Other				
McQuivey Raul S 22400 DAVIS DRIVE STERLING, VA 20164	ÂX	ÂX	Chairman, President, CEO	Â				
Cianoturoo								

Signatures

/s/ Raul S 08/05/2014 McQuivey

**Signature of Date Reporting Person

2 Reporting Owners

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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) Transaction amount represents the transferring of shares held by Dr. McQuivey and Karen McQuivey to either of two trusts (indicated in Table I) in which Dr. McQuivey and Karen McQuivey are the trustees.
- (2) Shares held through either of two trusts (indicated in Table I) in which Mr. McQuivey and Karen McQuivey are the trustees.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.