## Edgar Filing: NovaBay Pharmaceuticals, Inc. - Form 4

NovaBay Pharmaceuticals, Inc. Form 4 October 06, 2015

October 06	, 2015									
	<b>FORM 4</b> UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							PPROVAL 3235-0287		
Check this box if no longer subject to Section 16. SECURITIES							Estimated burden hoi response	urs per		
(Print or Type	e Responses)									
1. Name and Address of Reporting Person <u>*</u> WU ROY J			2. Issuer Name <b>and</b> Ticker or Trading Symbol NovaBay Pharmaceuticals, Inc. [NBY]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
	. , , ,	C., 5980		f Earliest T Day/Year) 2015	ransaction		below)	ve title Oth below) s & Corp Develo		
	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)			ıl	<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ul>			
EMERYV	ILLE, CA 94608							More than One R		
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Securities A	Acquired, Disposed	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution D any (Month/Day	Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3, 4	(A) or of (D) 4 and 5) (A) or	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)	
Reminder: Ro	eport on a separate line	e for each clas	ss of secu	urities benef	-	-	-			
					inforr	nation cont	spond to the colle tained in this forn ond unless the fo	n are not	SEC 1474 (9-02)	

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

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

number.

displays a currently valid OMB control

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. Transactio Code (Instr. 8)	5. Number of nDerivative6. Date Exercisable and Expiration DateSecurities(Month/Day/Year)Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title and Amour Underlying Securi (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amo Num Share
Option (right to buy)	\$ 0.27	10/05/2015		А	150,000	10/05/2016 <u>(4)</u>	10/05/2025	common stock	150
Restricted Stock Unit	\$ 0	10/05/2015		А	25,000	<u>(1)</u>	(2)	common stock	25,

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## **Reporting Owners**

Reporting Owner Name / Address		Relationships					
	Director	10% Owner	Officer	Other			
WU ROY J C/O NOVABAY PHARMACEUTICALS, INC. 5980 HORTON STREET, SUITE 550 EMERYVILLE, CA 94608			SVP Bus & Corp Development				
Signatures							
/s/ Justin Hall as attorney-in-fact for Roy Wu	10/06/2	015					

<u>\*\*</u>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) 100% vests on the one-year anniversary of the grant date, subject to continued employment.
- (2) Not Applicable
- (3) RSUs granted pursuant to 2007 Omnibus Incentive Plan.
- (4) Options granted pursuant to 2007 Omnibus Incentive Plan and NovaBay's Annual Employee Equity Refresh Program. 25% will vest on the first anniversary of the Grant Date. 6.25% will vest every three months thereafter.

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.