Edgar Filing: Avinger Inc - Form 4

Avinger Inc.

| Form 4 March 07, 20 |)16 | | | | | | | | | |
|--|--------------------------------|---------------------|--|---|-----------------------|----------|--|--|--|---|
| FORM | 1 / | | | | | | | | OMB AF | PROVAL |
| | UNIII | ED STATE | | | AND EXC , D.C. 205 | | NGE C | OMMISSION | OMB Number: | 3235-0287 |
| Check this box if no longer | | | | HANGES IN BENEFICIAL OWNERSHIP OF SECURITIES | | | | | Expires: January 31 2005 Estimated average burden hours per response 0.5 | |
| Form 5 obligation may cont <i>See</i> Instru 1(b). | ^{ns} inue. Section | 17(a) of the | Public Ut | ility Hol | | pany | Act of | e Act of 1934, 1935 or Sectior) | • | 0.0 |
| (Print or Type F | Responses) | | | | | | | | | |
| 1. Name and Address of Reporting Person * Banerjee Sougata2. Issuer Symbol | | | | Joen | | | | 5. Relationship of Reporting Person(s) to Issuer | | |
| | | | Avinger | Inc [AV | /GR] | | | (Check | k all applicable |) |
| (Month/D | | | Date of Earliest Transaction onth/Day/Year) /03/2016 | | | | Director 10% Owner Officer (give title Other (specify below) Senior VP of Operations | | | |
| | (Street) | | | ndment, D th/Day/Yea | ate Original r) | | | 6. Individual or Joi Applicable Line) _X_ Form filed by O | | |
| REDWOOD | O CITY, CA 9 | 4063 | | | | | | Form filed by M Person | | |
| (City) | (State) | (Zip) | Table | e I - Non-l | Derivative S | ecurit | ies Acqu | iired, Disposed of, | , or Beneficiall | y Owned |
| 1.Title of Security (Instr. 3) | 2. Transaction (Month/Day/Y | ear) Executi any | emed on Date, if /Day/Year) | 3. Transact Code (Instr. 8) | | sposed | of (D) | 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) |
| Restricted Stock Unit | 03/03/2016 | | | A | 12,500 (1) | (D) A | \$ 12.99 | 12,500 | 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)

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| 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. Transactic Code (Instr. 8) | 5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | 6. Date Exercisab Expiration Date (Month/Day/Year | | 7. Title and A Underlying S (Instr. 3 and | Securities |
|---|---|---|---|--|--|---|--------------------|---|------------------------------------|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Share |
| Option (right to buy) | \$ 12.99 | 03/03/2016 | | А | 25,000 | 03/03/2017(2) | 03/03/2026 | Common Stock | 25,000 |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|--|---------------|-----------|----------------------------|-------|--|--|--|
| | Director | 10% Owner | Officer | Other | | | |
| Banerjee Sougata 400 CHESAPEAKE DRIVE REDWOOD CITY, CA 94063 | | | Senior VP of Operations | | | | |

Signatures

| /s/ Sougata | 03/07/2016 |
|-------------|------------|
| Banerjee | 05/07/2010 |
| | |

<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) Reporting person received a grant under the 2015 Plan of RSUs with a grant date fair value of \$12.99 per share. The RSUs vest annually over four years in equal increments.
- (2) The stock options vest 25% on the first anniversary of the transaction date and monthly thereafter in 36 equal increments.

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.