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ALLIED HEALTHCARE PRODUCTS INC

Form 4

November 14, 2014

FORI	M 4						PPROVAL			
	UNITED			AND EXCHANO a, D.C. 20549	GE COMMISSION	OMB Number:	3235-0287			
if no lo	Check this box if no longer subject to Section 16. Form 4 or STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES						January 31 2009			
Section Form 4							average urs per			
•	ions Tileu pu	(a) of the Public	Utility Ho		hange Act of 1934, act of 1935 or Section f 1940	on				
Print or Type	e Responses)									
PECK WILLIAM A Syı AI				d Ticker or Trading THCARE C [AHPI]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Mo			of Earliest T /Day/Year) /2014	ransaction	_X_ Director 10% Owner Officer (give title Other (specify below)					
	(Street)		nendment, D Ionth/Day/Yea	_	Applicable Line) _X_ Form filed by	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting				
ST. LOUI	S, MO US 63130				Person	viore than One R	eporung			
(City)	(State)	(Zip) Ta	ble I - Non-	Derivative Securitie	s Acquired, Disposed o	f, or Beneficia	lly Owned			
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	any Cod (Month/Day/Year) (Ins		4. Securities onAcquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or Amount (D) Pri	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: R	eport on a separate line	e for each class of se	curities bene	ficially owned direct	ly or indirectly.					
					respond to the collect ontained in this form		SEC 1474 (9-02)			

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4. 5. Number	6. Date Exercisable and	7. Title and Amount of 8
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction Derivative	Expiration Date	Underlying Securities [

number.

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	Securities Acquired (A) or Disposed (D) (Instr. 3, and 5)	d d of	(Month/Day/Year)		(Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Option to purchase common stock	\$ 3.55						11/10/2012	11/10/2021	Common stock	1,500
Option to purchase common stock	\$ 4.34						11/11/2011	11/11/2020	Common stock	1,500
Option to purchase common stock	\$ 5.04						11/13/2010	11/13/2019	Common stock	1,500
Option to purchase common stock	\$ 4.05						11/13/2009	11/13/2018	Common stock	1,500
Option to purchase common stock	\$ 6.73						11/08/2008	11/08/2017	Common stcok	1,500
Option to purchase common stock	\$ 5.24						11/16/2007	11/16/2016	Common stock	1,500
Option to purchase common stock	\$ 5.63						12/14/2006	12/14/2015	Common stock	1,500
Option to purchase common stock	\$ 2.59						11/08/2013	11/08/2022	Common stock	1,500
Option to purchase	\$ 2.31						11/14/2014	11/14/2023	Common stock	1,500
	\$ 1.58	11/13/2014		A	1,500		11/13/2015	11/13/2024		1,500

Option to Common purchase stock

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

PECK WILLIAM A ONE BROOKINGS DRIVE CAMPUS BOX 1159 ST. LOUIS, MO US 63130

X

Signatures

William A. Peck 11/14/2013

**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) Issued pursuant to the Company's 2013 Director's Stock Option Plan.

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.

Reporting Owners 3