Edgar Filing: Casey Francis X. - Form 4

Casey Franci Form 4	IS X.										
December 18	3, 2018										
FORM	14								OMB AF	PROVAL	
	UNITED	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287 January 31	
Check thi if no long subject to Section 1 Form 4 or	6.	T STATEMENT OF CHAN				ICIA	LOW	NERSHIP OF	SHIP OF Estimated a burden hou response		
Form 5 obligation may cont <i>See</i> Instru 1(b).	ns Section 17(response 0. 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 R	Responses)										
Casey Francis X. Sym			Symbol	2. Issuer Name and Ticker or Trading ymbol RADIMED CORP [IRMD]				5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (Middle)	3. Date of	Earliest Tr	ansaction	-		(Chec.	ck all applicable)		
C/O IRADII	MED TION, 1025 WII		(Month/D 12/14/20	ay/Year)				below)	title 10% below) eg and Qual As		
	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person					
WINTER SI	PRINGS, FL 327	'08						Form filed by M Person	lore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if any (Month/Day/Year)		3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)				Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)				
				Code V	Amount	or (D)	Price	Transaction(s) (Instr. 3 and 4)			
Common Stock	12/14/2018			М	425	А	<u>(1)</u>	51,816	D		
Common Stock	12/14/2018			F	104	D	\$ 27.02	51,712	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.

Edgar Filing: Casey Francis X. - Form 4

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

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. Transacti Code (Instr. 8)	5. Number on of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		(Instr. 3 and 4)		8. Price Derivat Securit (Instr. 5
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Restricted Stock Units	<u>(1)</u>	12/14/2018		М	425	(2)	(2)	Common Stock	425	\$ C

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Casey Francis X. C/O IRADIMED CORPORATION 1025 WILLA SPRINGS DR. WINTER SPRINGS, FL 32708			VP of Reg and Qual Assur					

Signatures

/s/ Francis X. Casey <u>**Signature of</u> Reporting Person L2/18/2018 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) Restricted stock units convert into common stock on a one-for-one basis.

On December 14, 2016, The reporting person received restricted stock units under Iradimed Corporation's 2014 Equity Incentive Plan.
 (2) The restricted stock units vest in four equal annual installments beginning on December 14, 2017. Upon vesting, the reporting person will receive a number of shares of common stock equal to the number of restricted stock units that have vested.

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.