Edgar Filing: IRADIMED CORP - Form 4

Form 4	CORP										
November (06, 2015										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION							OMB APPROVAL				
	SIAIESS	SECURITIES AND EXCHANGE CO Washington, D.C. 20549					OMMINISSION	OMB Number:	3235-0287		
Check th if no lon	gor	or.								January 31, 2005	
subject t Section Form 4 o	STATE 16. or	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES									
Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Ad Section 17(a) of the Public Utility Holding Company Act of 192 30(h) of the Investment Company Act of 1940						1935 or Section	1				
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> Novovich Serge			· · · · · · · · · · · · · · · · · · ·					5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First)	(Middle)	3. Date o	f Earliest T	ransaction			(Check all applicable)			
C/O IRADIMED CORPORATION, 1025 WILLA SPRINGS DR.			11/05/2015					X Director Officer (give t below)		Owner er (specify	
	(Street)	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 S	SPRINGS, FL 32	708						Form filed by M Person			
(City)	(State)	(Zip)	Tab	le I - Non-	Derivative	e Secu	rities Acqu	uired, Disposed of,	or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if any (Month/Day/Year)			3. 4. Securities Acquired (A) Transactionor Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)				Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)	(Instr. 4)		
Common Stock	11/05/2015			А	4,375	А	\$ 1.29	101,483 <u>(1)</u>	D		
Common Stock	11/05/2015			S	500	D	\$ 30.8617	, 100,983	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: IRADIMED CORP - 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. Transactic Code (Instr. 8)	5. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. H Der Sec (In:
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (Right to Buy)	\$ 1.29	11/05/2015		М	4,375	(2)	11/18/2022	Common Stock	4,375	

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Novovich Serge C/O IRADIMED CORPORATION 1025 WILLA SPRINGS DR. WINTER SPRINGS, FL 32708	Х					
Signatures						

/s/ Serge Novovich 11/06/2015 <u>**</u>Signature of Date Reporting Person

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) Includes 93,333 shares which were previously owned indirectly through Pacific Summit Capital LLC which form of ownership has changed to direct ownership.
- (2) This option was granted on 11/20/2012 and vests over 4 years in equal annual installments commencing on the first anniversary of the grant date.

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.