ENDOLOGIX INC /DE/

Form 4 June 06, 2017

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number: 3235-0287

Estimated average

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005

OMB APPROVAL

Form 4 or Form 5 obligations may continue.

See Instruction

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

burden hours per response... 0.5

1(b).

(Print or Type Responses)

| 1. Name and A O'Quinn Sha | Symbol | 2. Issuer Name and Ticker or Trading Symbol | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
|------------------------------|---------------------|--|---|---------------------|-----------|--|--|------------------------|-------------------------|
| | ENDOI | ENDOLOGIX INC /DE/ [ELGX] | | | | (Check all applicable) | | | |
| (Last) | (First) (M | (iddle) 3. Date or | 3. Date of Earliest Transaction | | | · | • | , | |
| | | (Month/Day/Year) | | | | Director | | Owner | |
| 4239 E DUI | 05/31/2 | 05/31/2017 | | | | X Officer (give title Other (specify below) VP, Clinical & Regulatory | | | |
| | 4. If Ame | 4. If Amendment, Date Original | | | | 6. Individual or Joint/Group Filing(Check | | | |
| | Filed(Mor | Filed(Month/Day/Year) | | | | Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person | | | |
| GILBERT, | | · | | | | | | | |
| (City) | (State) (| Zip) Tabl | e I - Non-D | erivative S | Securit | ies Acc | quired, Disposed | of, or Beneficial | lly Owned |
| 1.Title of | 2. Transaction Date | 2A. Deemed | 3. | 4. Securit | ies Ac | quired | 5. Amount of | 6. Ownership | 7. Nature of |
| ` , | | Execution Date, if | ` ' ' · ' · ' · ' · ' · ' · ' · ' · ' · | | | of | Securities | Form: Direct | Indirect |
| (Instr. 3) | | any (Month/Day/Year) | Code (Instr. 8) | (D) | 4 and 4 | 2) | Beneficially Owned | (D) or Indirect (I) | Beneficial Ownership |
| | | (Wionali Bayi Tear) | (111311.0) | (Instr. 3, 4 and 5) | | | Following | (Instr. 4) | |
| | | | | | (A) or | | Reported Transaction(s) (Instr. 3 and 4) | | |
| C | | | Code V | Amount | (D) | Price | , | | |
| Common Shares | 05/31/2017 | | A | 18,000 (1) | A | \$0 | 94,356 | 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.

SEC 1474

(9-02)

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. Transactio Code (Instr. 8) | 5. Number of orDerivative 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) | |
|---|---|---|---|--|---|--|--------------------|---|-------------------------------------|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares |
| Option to Purchase | \$ 4.82 | 05/31/2017 | | A | 65,000 (2) | 06/30/2017 | 05/31/2027 | Option to Purchase | 65,000 |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|--------------------------------|---------------|-----------|---------------------------|-------|--|--|--|
| • 0 | Director | 10% Owner | Officer | Other | | | |
| O'Quinn Shari L | | | | | | | |
| 4239 E DUBOIS CT | | | VP, Clinical & Regulatory | | | | |

Signatures

GILBERT, AZ 85298

Shari O'Quinn by Timothy N. Brady, Attorney-in-Fact for Reporting 06/06/2017 Person

**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) Performance restricted stock unit award based on a sales milestone.
- (2) Options vest ratably over forty-eight months.

Remarks:

Shares granted reported on Form 4 late due to administrative error.

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.

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