

ALLIED HEALTHCARE PRODUCTS INC

Form 4

November 14, 2016

FORM 4**UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549**

Check this box
if no longer
subject to
Section 16.
Form 4 or
Form 5
obligations
may continue.
See Instruction
1(b).

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF
SECURITIES**

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

OMB APPROVAL

OMB
Number: 3235-0287
Expires: January 31,
2005
Estimated average
burden hours per
response... 0.5

(Print or Type Responses)

1. Name and Address of Reporting Person *
Root Joseph Ernest JR

2. Issuer Name **and** Ticker or Trading
Symbol
ALLIED HEALTHCARE
PRODUCTS INC [AHPI]

5. Relationship of Reporting Person(s) to
Issuer

(Check all applicable)

(Last) (First) (Middle)
QUALIPAT, 1809 JONES COVE
RD.

3. Date of Earliest Transaction
(Month/Day/Year)
11/10/2016

☒ Director ☐ 10% Owner
☐ Officer (give title below) ☐ Other (specify below)

(Street)
CLYDE, NC 28721

4. If Amendment, Date Original
Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check
Applicable Line)
☒ Form filed by One Reporting Person
☐ Form filed by More than One Reporting
Person

(City) (State) (Zip)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction Code (Instr. 8) | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | 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 Ownership (Instr. 4) |
|---------------------------------------|---|---|---|--|--|--|---|
| | | | Code | V Amount (D) Price | | | |
| Common Stock | | | | | 1,000 | D | |
| Common Stock | | | | | 1,000 | I | Individual Retirement Account |

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)

Edgar Filing: ALLIED HEALTHCARE PRODUCTS INC - 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. Transaction Code (Instr. 8) | 5. Number of 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. D S (C | |
|---|--|---|---|--------------------------------------|---|--|-----|---|--------------------|-----------------|--|
| | | | | 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 sock | 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 stock | 1,500 |
| Option to purchase common stock | \$ 5.24 | | | | | | | 11/16/2007 | 11/16/2016 | Common stock | 1,500 |
| Option to purchase common stock | \$ 2.59 | | | | | | | 11/08/2013 | 11/08/2022 | Common stock | 1,500 |
| Option to purchase common stock | \$ 2.31 | | | | | | | 11/14/2014 | 11/14/2023 | Common stock | 1,500 |

| | | | | | | | | | |
|---------------------------------|---------|------------|--|---|-------|------------|------------|--------------|-------|
| Option to purchase common stock | \$ 1.58 | | | | | 11/13/2015 | 11/13/2024 | Common stock | 1,500 |
| Option to purchase common stock | \$ 1.17 | | | | | 11/12/2016 | 11/12/2025 | Common stock | 1,500 |
| Option to purchase common stock | \$ 1.13 | 11/10/2016 | | A | 1,500 | 11/10/2017 | 11/10/2026 | Common stock | 1,500 |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | |
|---|---------------|-----------|---------|-------|
| | Director | 10% Owner | Officer | Other |
| Root Joseph Ernest JR QUALIPAT 1809 JONES COVE RD. CLYDE, NC 28721 | | X | | |

Signatures

Joseph E. Root 11/14/2016

____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) (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.