

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
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(Print or Type Responses)

1. Name and Address of Reporting Person *
PECK WILLIAM A

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)
ONE BROOKINGS
DRIVE, CAMPUS BOX 1159

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

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

(Street)
ST. LOUIS, MO 63130

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 Indirect Beneficial Ownership (Instr. 4)
			Code	V Amount (D) Price			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

**Persons who respond to the collection of
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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 Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	4. Transaction of Derivative	5. Number	6. Date Exercisable and Expiration Date	7. Title and Amount of Underlying Securities	8
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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 of (D) (Instr. 3, 4, and 5)	(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 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	\$ 2.31						11/14/2014	11/14/2023	Common stock	1,500
Option to purchase	\$ 1.58						11/13/2015	11/13/2024	Common stock	1,500
Option to purchase	\$ 1.17						11/12/2016	11/12/2025	Common stock	1,500
	\$ 1.13	11/10/2016	A		1,500		11/10/2017	11/17/2026		1,500

Option to
purchaseCommon
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 63130	X

Signatures

William A. Peck 11/14/2016

__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.

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