Edgar Filing: HARVARD BIOSCIENCE INC - Form 4

HARVARD I Form 4 June 08, 2015	BIOSCIENCE IN	С										
FORM	4									PROVAL		
Washington, D.C. 20549							COMMISSION	OMB Number:	3235-0287			
Check this if no longe									Expires:	January 31, 2005		
subject to STATEMENT OF CHANG Section 16.				GES IN BENEFICIAL OWNERSHIP OF SECURITIES					Estimated average burden hours per			
Form 4 or Form 5		uant to Se	action 16	S(a) of the	Securitie	ac Fr	chang	e Act of 1934,	response	0.5		
obligation may conti <i>See</i> Instru- 1(b).	nue. Section 17(a) of the P	ublic Ut	· · /	ing Com	pany	Act of	f 1935 or Section	n			
(Print or Type R	esponses)											
UVEGES GEORGE Symbol HARVA			Symbol	er Name and Ticker or Trading ARD BIOSCIENCE INC]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last)	(First) (M			Earliest Tra	ansaction			X Director	title 10%	Owner er (specify		
207 WILLOW BROOK DRIVE(Month/D 06/04/20				-				below)	below)	(speeny		
(Street) 4. If Amer				endment, Date Original				6. Individual or Joint/Group Filing(Check				
Filed(Month/Day/Year) Applicable Line _X_Form filed WAYLAND MA 01778-5124Form filed							One Reporting Person More than One Reporting					
(City)	(State) (Z	Zip)	T - 1, 1,	I N. D		,	• • •					
		-					-	uired, Disposed of		•		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	Date, if	3.4. Securities AcquiredTransaction(A) or Disposed ofCode(D)(Instr. 8)(Instr. 3, 4 and 5)			SecuritiesIBeneficially0OwnedI	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial Ownership (Instr. 4)			
Common				Code V	Amount 14,400	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				
Stock	06/04/2015			А	<u>(1)</u>	А	\$0	61,755 <u>(2)</u>	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.

 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)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V		Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Add	lress	Relationships								
	Directo	or 10%	Owner	Officer	Other					
UVEGES GEORGE 207 WILLOW BROOK DF WAYLAND, MA 01778-5										
Signatures										
/s/ George Uveges	06/08/2015									
<u>**</u> Signature of	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) Represents a deferred stock award of 14,400 restricted stock units which fully vest on the earlier to occur of (i) the date of the Issuer's next Annual Meeting of Stockholders after June 4, 2015, immediately prior to the commencement of such meeting, and (ii) June 4, 2016.

Includes (a) a deferred stock award of 14,400 restricted stock units which fully vest on the earlier to occur of (i) the date of the Issuer's

(2) next Annual Meeting of Stockholders after June 4, 2015, immediately prior to the commencement of such meeting, and (ii) June 4, 2016.; and (b) 47,355 shares of common stock held by the Reporting Person.

Remarks:

Reporting Person

This form is signed under power of attorney.

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.