Edgar Filing: SASSINE ANDY - Form 4

CACCINE ANDV

Form 4												
October 04, 2	2017											
FORM	$ 4 _{\text{UNITED}}$	STATES	SECUD	ITIES			11 A 11	NCE	COMMISSION		PPROVAL	
-	UNITED	SIAILS				D.C. 205		NGE (201011011551010	OMB Number:	3235-0287	
Check thi				8	,					Expires:	January 31,	
if no longer subject to Section 16. Form 4 or				CIA	LOW	NERSHIP OF	Estimated average burden hours per response 0.5					
Form 5 obligations may continue. See Instruction 1(b). 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												
(Print or Type R	lesponses)											
1. Name and Address of Reporting Person <u>*</u> SASSINE ANDY			2. Issuer Name and Ticker or Trading Symbol ICAD INC [icad]					g	5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction					(Chec	k all applicable	e)		
C/O ICAD, I ROAD, SUI	INC., 98 SPIT E TE 100	BROOK	(Month/Da 09/29/20	-)				X Director Officer (give below)		Owner er (specify	
(Street)			4. If Amendment, Date Original						6. Individual or Joint/Group Filing(Check			
Filed(Month/Day/Year) Applicable Line) _X_Form filed by 0Form filed by 0Form filed by 0 Person						One Reporting Pe Iore than One Re						
(City)	(State)	(Zip)	Tabl	I Nov	. D.			tion 1 or	wined Disposed of	f or Donoficial	ly Owned	
		-			1-De				uired, Disposed of		-	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year	ansaction Date 2A. Deemed th/Day/Year) Execution Date, if any (Month/Day/Year)		3. 4. Securities Acquired Transaction(A) or Disposed of Code (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or Code V Amount (D) Price			d of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
Common Stock (1)	09/29/2017			A		1,980	A	\$ 4.42	1,260,170	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)

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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. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address		Relationsh	nips				
	Director	10% Owner	Officer	Other			
SASSINE ANDY C/O ICAD, INC. 98 SPIT BROOK ROAD, SUITE 100 NASHUA, NH 03062	Х						
Signatures							
/s/Annette Heroux, Attorney-in-Fact	10/04/20)17					
**Signature of Reporting Person	Date	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) RSA with Immediate vesting schedule.

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.