Edgar Filing: INSIGNIA SYSTEMS INC/MN - Form 4

INSIGNIA S Form 4 August 17, 20	YSTEMS INC/N)15	ЛN									
FORM	4								OMB AF	PROVAL	
Washington, D.C. 20549						OMMISSION	OMB Number:	3235-0287			
Check this box if no longer subject toSTATEMENT OF CHANGES IN BENEFICIAL OV Section 16.Form 4 or Form 5Filed pursuant to Section 16(a) of the Securities Exchant							Estimated average burden hours per response 0.5				
obligation may conti <i>See</i> Instru 1(b).	s Section 17(a) of the Pu	ublic Ut		ling Cor	npan	y Act of	1935 or Section	I		
(Print or Type R	esponses)										
AIR T INC Symbol			Symbol I NSIGN	er Name and Ticker or Trading NIA SYSTEMS INC/MN				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) P O BOX 48		(3. Date of Month/D)8/14/20	-	ransaction			Director Officer (give t below)	itleOthe below)	Owner r (specify	
			endment, Date Original nth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person				
DENVER, N	IC 28037							Form filed by M Person	ore than One Rej	porting	
(City)	(State)	(Zip)	Table	e I - Non-D) erivative	Secur	ities Acqu	iired, Disposed of,	or Beneficiall	y Owned	
	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution I any (Month/Day	Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)			d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common	08/14/2015			Code V P	Amount 800	or (D) A	Price \$ 2.5899	(Instr. 3 and 4) 1,603,806	D (1)		
Stock	00/14/2013			r	800	A	<u>(2)</u>	1,005,800	D <u></u>		

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)	4. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address				
1 0	Director	10% Owner	Officer	Other
AIR T INC P O BOX 488 DENVER, NC 28037		Х		
Signatures '/s/Candice L. Otey, Chief Fina	noial Off	ioor Socrato	m, Pr	

Treasurer

**Signature of 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).

The Reporting Person may be deemed to be a member of a Section 13(d) group disclosed in a Schedule 13D filed on behalf of the Reporting Person and the other members of such group on August 18, 2014. The Reporting Persons disclaims beneficial ownership of the

(1) shares of Common Stock held by the other members of this Section 13(d) group except to the extent of its pecuniary interest therein. The securities reported herein do not include any securities held by the other members of this Section 13(d) group, as such shares have been reported in a separate form filing under Section 16.

The price in Column 4 is a weighted average price. The prices actually paid ranged from \$2.57 to \$2.60. The reporting person has (2) provided to the issuer, and will provide to any security holder of the issuer, or the SEC staff, upon request, information regarding the number of shares purchased at each price within the range for all transactions reported in this Form 4 utilizing an average weighted price.

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.

08/17/2015

Date