MISONIX INC Form 4 October 08, 2009

FORM 4

Form 5

obligations

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

Check this box if no longer subject to Section 16. Form 4 or

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

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 Responses)

(Last)

1. Name and Address of Reporting Person * **ALLIGER HOWARD**

2. Issuer Name and Ticker or Trading

Symbol

(Middle)

MISONIX INC [MSON] 3. Date of Earliest Transaction

(Month/Day/Year)

10/07/2009

FRONTIER PHARMACEUTICAL INC, 10 PONDEROSA DRIVE

(Street)

(First)

4. If Amendment, Date Original

Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to Issuer

OMB APPROVAL

3235-0287

January 31,

2005

0.5

OMB

Number:

Expires:

response...

Estimated average

burden hours per

(Check all applicable)

_X__ Director 10% Owner Officer (give title _ Other (specify

below) 6. Individual or Joint/Group Filing(Check

Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting

MELVILLE, NY 11747

(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 action(A) or Disposed of (D) (Instr. 3, 4 and 5) 8)			5. Amount of Securities Beneficially Owned Following Reported	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
			Code V	Amount	or (D)	Price	Transaction(s) (Instr. 3 and 4)				
Common Stock	10/07/2009		S	1,100	D	\$ 2.52	255,408	D			
Common Stock	10/07/2009		S	6,800	D	\$ 2.51	248,608	D			
Common Stock	10/07/2009		S	200	D	\$ 2.53	248,408	D			
Common Stock	10/07/2009		S	100	D	\$ 2.55	248,308	D			
Common Stock	10/07/2009		S	2,500	D	\$ 2.4	245,808	D			

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Common Stock	10/07/2009	S	4,400	D	\$ 2.36	241,408	D
Common Stock	10/07/2009	S	7,600	D	\$ 2.35	233,808	D
Common Stock	10/07/2009	S	7,000	D	\$ 2.34	226,808	D
Common Stock	10/07/2009	S	1,700	D	\$ 2.42	225,108	D
Common Stock	10/07/2009	S	2,700	D	\$ 2.38	222,408	D
Common Stock	10/07/2009	S	15,900	D	\$ 2.37	206,508	D

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

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SEC 1474 (9-02)

> 9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	isable and	7. Tit	le and	8. Price of	9
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration Da	ite	Amou	ınt of	Derivative	J
Security	or Exercise		any	Code	of	(Month/Day/Y	Year)	Unde	rlying	Security	,
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)]
	Derivative				Securities			(Instr	3 and 4)		(
Security					Acquired						J
					(A) or						J
					Disposed						-
					of (D)						(
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration	Title	or Number		
						Exercisable	Date		of		
				Code V	(A) (D)				Shares		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address

Director 10% Owner Officer Other

ALLIGER HOWARD FRONTIER PHARMACEUTICAL INC 10 PONDEROSA DRIVE MELVILLE, NY 11747

X

Reporting Owners 2

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Signatures

/s/ Howard Alliger 10/08/2009

**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).

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.

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