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| MISONIX IN Form 4 March 01, 20 FORM Check thi if no long subject to Section 1 Form 4 o Form 5 obligation may cont <i>See</i> Instru 1(b). | D07 I 4 UNITED S is box ger 6. r 5 6. r 5 6. r 5 5 6. r 5 5 6. r 5 5 5 5 5 5 5 5 5 5 5 5 5 | STATES SECUE Was ENT OF CHAN suant to Section 1 a) of the Public U 30(h) of the In | Shington, GES IN SECUR 6(a) of the tility Hold | D.C. 20 BENEFI ITIES e Securit ling Con | 549 ICIA ies E ipany | L OW xchang / Act o | NERSHIP OF ge Act of 1934, f 1935 or Sectio | OMB Number: Expires: Estimated a burden hou response | irs per | |
|---|---|---|---|---|-------------------------------|----------------------------------|---|--|-----------|--|
| ALLIGER HOWARD Syn | | | 2. Issuer Name and Ticker or Trading Symbol MISONIX INC [MSON] | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| (| | | 3. Date of Earliest Transaction(Month/Day/Year)02/28/2007 | | | | Officer (give title 0ther (specify below) below) | | | |
| | | | nendment, Date Original fonth/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| MELVILLE | E, NY 11747 | | | | | | Form filed by M Person | More than One Re | eporting | |
| (City) | (State) (| Zip) Tabl | e I - Non-D | erivative | Secur | ities Acc | quired, Disposed of | f, or Beneficial | lly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | Code (Instr. 8) | 4. Securi on(A) or D (D) (Instr. 3, | ispose 4 and (A) or | 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 | 02/28/2007 | | S | 200 | D | \$ 5.75 | 394,308 | D | | |
| Common Stock | 02/28/2007 | | S | 1,400 | D | \$ 5.66 | 392,908 | 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.

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 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) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transacti Code (Instr. 8) | 5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | 3 | Date | Amou Under Secur | rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr |
|---|---|---|---|---------------------------------------|---|---------------------|--------------------|------------------------|--|---|---|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Ow | Relationships | | | | | |
|--|---------------|-----------|---------|-------|--|--|
| FB | Director | 10% Owner | Officer | Other | | |
| ALLIGER HOWARD C/O FRONTIER PHARMACEUTICAL INC 135 SPAGNOLI RD MELVILLE, NY 11747 | | Х | | | | |
| Signatures | | | | | | |
| /s/ Howard Alliger | 03/01/2007 | | | | | |
| <u>**</u> 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).

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.