MISONIX INC Form 4

September 11, 2015

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

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response...

if no longer subject to Section 16. Form 4 or Form 5

Check this box

obligations may continue. See Instruction

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

1(b).

(Last)

(Print or Type Responses)

1. Name and Address of Reporting Person * Miner Charles

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to

Issuer

MISONIX INC [MSON]

(Check all applicable)

INTERNAL MEDICINE

(First)

ASSOCIATES OF DARIEN, 1500 **POST ROAD**

3. Date of Earliest Transaction

(Month/Day/Year) 09/10/2015

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

(Street)

(Middle)

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check

Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting

DARIEN, CT 06820

(City)	(State)	(Zip) Tabl	e I - Non-I	Derivative	Secur	ities Acqu	ired, Disposed of	, or Beneficiall	y 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. Securit on(A) or Di (Instr. 3,	sposed 4 and (A) or	of (D) 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock, par value \$.01	09/10/2015		Code V	Amount 15,000	(D)	Price \$ 7.6	17,500	D	
Common Stock, par value \$.01	09/10/2015		S	3,230	D	\$ 10.5	14,270	D	
Common Stock, par value \$.01	09/10/2015		S	2,200	D	\$ 10.3	12,070	D	
Common	09/10/2015		S	2,500	D	\$	9,570	D	

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Stock, par value \$.01					10.25	
Common Stock, par value \$.01	09/10/2015	S	100	D	\$ 10.6 9,470	D
Common Stock, par value \$.01	09/11/2015	S	2,200	D	\$ 7,270 10.25	D
Common Stock, par value \$.01	09/11/2015	S	1,700	D	\$ 9.87 5,570	D
Common Stock, par value \$.01	09/11/2015	S	271	D	\$ 10 5,299	D
Common Stock, par value \$.01	09/11/2015	S	100	D	\$ 10.1 5,199	D
Common Stock, par value \$.01	09/11/2015	S	2,229	D	\$ 9.85 2,970	D
Common Stock, par value \$.01	09/11/2015	S	470	D	\$ 9.931 2,500	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)

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. Transactic Code (Instr. 8)	5. Number of iorDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Derivative Expiration Date Gecurities (Month/Day/Year) Acquired (A) or Disposed of D) Instr. 3, 4,		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (right to	\$ 7.6	09/10/2015		M		15,000	09/26/2005	09/26/2015	Common Stock, par value	15,000

buy) \$.01

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Miner Charles
INTERNAL MEDIC

INTERNAL MEDICINE ASSOCIATES OF DARIEN 1500 POST ROAD

X

DARIEN, CT 06820

Signatures

/s/ Charles Miner 09/11/2015

**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).
- (1) Granted pursuant to issuer's option plan.

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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