FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>LaPorte Steve</u>								icker or Trac MICS II				5. Relationship of Reporting (Check all applicable) X Director			g Person(s) to Issuer 10% Owner						
(Last)	st) (First) (Middle) 3 QUEENSBURY AVE.						of Earlie 2008	est Tra	nsaction (M	onth/	Day/Year)		Officer below)	(give title		Other (s below)	specify				
(Street) QUEENSBURY NY 12804					_ 4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicabline) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(S	tate)	(Zip)												Persor	1					
1. Title of Security (Instr. 3)				2. Trans	2. Transaction			med on Dat	3. Transa Code (Transaction Disposed Code (Instr. 5)		ities Acquired (A) o d Of (D) (Instr. 3, 4		(A) or	5. Amount of Securities Beneficially Owned Followin Reported		Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock			08/0	8/05/2008				Code	v	Amount	(D)		Price \$15.	Transaction(s) (Instr. 3 and 4)			D				
						P 1,000 A \$15 ive Securities Acquired, Disposed of, or Beneficial										015		D			
	l -			(e.g., p	outs,		ls, wa	rrant	ts, option	ıs, c	converti	ble	secur	ities)		I			T		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,		ansaction of Ex ode (Instr. Derivative (M			Expiration	5. Date Exercisable and Expiration Date Month/Day/Year)			7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title		Amount or Number of Shares							
Non- Qualified Stock Option (right to buy)	\$16.53								05/01/2008	(1)	05/01/2014		nmon ock	25,000		25,000	0	D			
Non- Qualified Stock Option (right to buy)	\$17.76								07/27/2008	(2)	07/27/2017		nmon ock	6,000		6,000		D			
Non- Qualified Stock Option (right to buy) ⁽³⁾	\$20.15								01/29/200	7	09/29/2015		nmon ock	6,027		6,027	,	D			
Non- Qualified Stock Option (right to buy) ⁽³⁾	\$22.06								01/29/200	7	06/07/2016		nmon ock	4,434		4,434		D			

Explanation of Responses:

- 1. Options for 33 1/3% of the shares are each exercisable on 5/1/08, 5/1/09, 5/1/10, respectively.
- $2. \ Options \ for \ 25\% \ of \ the \ total \ number \ of \ shares \ each \ become \ exercisable \ on \ 7/27/08, \ 7/27/09, \ 7/27/10, \ and \ 7/27/11.$
- 3. Options to acquire .1722 shares of AngioDynamics common stock were received in exchange for options to acquire 1 share of RITA Medical Systems, Inc., in conjunction with AngioDynamics acquisition of RITA Medical on January 29, 2007. Upon exercise, the option holder is also entitled to \$.515 per original RITA share, or \$2.99 per AngioDynamics share exercised.

By: K. Wayne McDougall For: 08/07/2008

Steve Laporte

** Signature of Reporting Person

Date

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

- * 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.

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 Number.