FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OIVID APPROVAL										
OMB Number:	3235-028									
Estimated average burden										

0.5

hours per response:

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>Trowbridge Stephen A</u>					2. Issuer Name and Ticker or Trading Symbol ANGIODYNAMICS INC [ ANGO ]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner					
(Last)	(Firs	st) (I	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 07/27/2016						]	X Officer (give title Other (specify below) SVP and General Counsel					
(Street)  LATHAM  (City)	NY (Sta		2110 Zip)		I. If Am	endment, C	Date o	f Original F	iled (	(Month/Day/	Year)	Line	X Form fil	ed by One	e Repo	(Check Appl rting Person One Report	
		Tab	le I - Non-D	erivat	ive S	ecurities	Ac	quired,	Disp	osed of	, or Bei	neficially	y Owned				
1. Title of Security (Instr. 3)  2. Transc Date (Month/D				ate	action 2A. Deemed Execution Date, if any (Month/Day/Year)			Code (Instr.				Beneficia Owned F	s Illy ollowing	Form	: Direct I r Indirect I str. 4)	7. Nature of Indirect Beneficial Ownership	
									v	Amount	(A) or (D) Pric		Reported Transaction(s) (Instr. 3 and 4)				Instr. 4)
Common Stock 07/2'				07/27/2	7/2016		A		3,447 <sup>(1)</sup> A		\$0	31,	31,280		D		
		٦	Fable II - De (e.							sed of, o			Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date if any (Month/Day/Ye	Cod	nsaction de (Instr			6. Date Ex Expiration (Month/Da	Date	of Securities		ties ng e Security	8. Price of Derivative Security (Instr. 5)	9. Numbo derivativ Securitie Beneficia Owned Followin Reported Transact (Instr. 4)	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)
				Cod	ie V	(A)	(D)	Date Exercisab		Expiration Date	Title	Amount or Number of Shares					
Non- Qualified Stock Option (right to buy)	\$16.59	07/27/2016		A		12,142		07/27/2017	7 <sup>(2)</sup>	07/27/2023	Common Stock	12,142	\$0	12,14	12	D	
Performance	(3)	07/27/2016		A		6,894		(3)		(3)	Common	6,894	\$0	6,98	4	D	

Right

- 1. This acquisition of 3,447 shares of common stock ("Common Stock") of AngioDynamics, Inc. (the "Company"), represents 3,447 restricted stock units, each of which represents a contingent right to receive one share of Common Stock. These restricted stock units vest in four equal installments beginning on July 27,2017, such that 25% of the restricted stock units will vest on each of July 27, 2017, 2018, 2019 and 2020.
- 2. These stock options vest in four equal annual installments beginning on July 27, 2017, such that 25% of the options will vest on each of July 27, 2017, 2018, 2019 and 2020.
- 3. Each performance right represents a contingent right to receive one share of Common Stock. The target number of shares of Common Stock is set forth in columns 5 and 7 of Table II. Between 0% and 200% of the target number will be earned based on total shareholder return relative to a peer group of companies over a three-year performance period covering the Company's fiscal years 2017, 2018 and 2019. Any shares that do not vest at the end of the performance period will be forfeited.

/s/ Stephen A. Trowbridge, 07/29/2016 Attorney in Fact

\*\* Signature of Reporting Person Date

Stock

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.