Instruction 1(b)

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| 20549 |
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| STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP |
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OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

5. Relationship of Reporting Person(s) to Issuer

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

2. Issuer Name and Ticker or Trading Symbol

| 1. Name ar Richard | | Reporting Person* | | | | | | e and Tid YNAI | | | | ymbol ANGO |] | | Relationship o eck all applic Directo | able) r | g Pers | 10% Ow | ner |
|---|---|---|--|--------|--|---|---|---|-----------------|---|--------|--|-----------------|--|---|--|---|--|---|
| (Last) (First) (Middle) 14 PLAZA DRIVE | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 11/15/2017 | | | | | | | | | below) | Officer (give title Other (s below) SVP, GM - Oncology | | | pecify |
| (Street) LATHAM NY 12110 | | | | 4. | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | Line | Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting | | | | | |
| (City) | (State) (Zip) | | | | | | | | | | | | | | | іеа ву мог | e tnan | One Report | ing |
| | | Tal | ole I - No | n-Deri | ivativ | e Se | ecuri | ties Ad | cquire | d, D | isp | osed o | f, or Be | neficial | ly Owned | | | | |
| Date | | | | Date | 2. Transaction Date (Month/Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Cod | Transaction Code (Instr. | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 | | | Beneficia Owned F | es ally Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | : Direct II r Indirect E str. 4) C | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | | Cod | de V | | Amount (A) or (D) | | Price | Transact | Reported Transaction(s) (Instr. 3 and 4) | | (| |
| Common | 11/1 | 1/15/2017 | | | | М | | | 10,000 |) A | \$10.6 | 30, | 30,754 | | D | | | | |
| Common Stock | | | | | 11/15/2017 | | | | M | | | 17,409 |) A | \$11.9 |)2 48, | 48,163 | | D | |
| Common | Stock | | | 11/1 | 15/201 | L7 | | | S | | | 27,409 |) D | \$16.2 | 20, | 20,754 D | | | |
| | | | Table II - | | | | | | | | | sed of, onvertib | | | Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year | 3A. Deeme Execution I if any (Month/Day | Date, | 4. Transaction Code (Instr. 8) | | of Deri Sec Acq (A) Disp of (I | umber ivative urities uired or oosed O) (Instr. and 5) | Expirat | 6. Date Exercisabl Expiration Date (Month/Day/Year) | | | of Securities | | 8. Price of Derivative Security (Instr. 5) | 9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4) | e s Illy | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercis | sable | | Expiration Date | Title | Amount or Number of Shares | | | | | |
| Non- Qualified Stock Option (right to buy) | \$10.63 | 11/15/2017 | | | M | | | 10,000 | 08/03/2 | 2013 ⁽¹⁾ | (| 08/03/2019 | Common Stock | 10,000 | \$0 | 0 | | D | |
| Non- Qualified Stock Option | \$11.92 | 11/15/2017 | | | M | | | 17,409 | 08/06/2 | 2014 ⁽²⁾ | | 08/06/2020 | Common Stock | 17,409 | \$0 | 0 | | D | |

Explanation of Responses:

- 1. Options for one-fourth of the shares became exercisable on 8/3/2013, 8/3/2014, 8/3/2015 and 8/3/2016, respectively.
- $2. \ Options \ for \ one-fourth \ of \ the \ shares \ became \ exercisable \ on \ 8/6/2014, \ 8/6/2015, \ 8/6/2016 \ and \ 8/6/2017, \ respectively.$

/s/ Stephen A. Trowbridge, **Attorney in Fact**

11/17/2017

** 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.