FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washing

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

pton, D.C. 20549	OMB APPROVAL
	CIVID 7 II T TO 17 IL

OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

## 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										1					
Name and Address of Reporting Person*  LaPorte Steve						2. Issuer Name <b>and</b> Ticker or Trading Symbol ANGIODYNAMICS INC [ ANGO ]									Relationship of Reporting Person(s) to Issuer (Check all applicable)						
<u>LaPorte Steve</u>													X Director			10% Owner					
(Last) (First) (Middle) 603 QUEENSBURY AVE.						3. Date of Earliest Transaction (Month/Day/Year) 05/15/2008									Officer below)	(give title		Other (s below)	specify		
						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable						
(Street)															Line)						
QUEENSBURY NY 12804												X Form filed by One Reporting Person  Form filed by More than One Reporting									
(City) (State) (Zip)												Person									
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
Date			2. Transa Date (Month/D		ır)   i	2A. Deer Execution if any (Month/I	, Transaction Di		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4				Benefici Owned F	es ally Following	Form (D) o	n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
								Code	v	Amount	Amount (A)		Price	Reported Transact (Instr. 3	tion(s)						
Common	Common Stock			05/15	/2008		P		1,300	) A \$1		\$15.1	28 2,	2,013		D					
		-	Table II -								osed of converti				y 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 if any (Month/Da	Date,		nsaction of Ex			Expiration	Expiration Date (Month/Day/Year)  Delian			7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	re es ally ng d tion(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title		Amount or Number of Shares							
Non- Qualified Stock Option (right to buy)	\$16.53								05/01/2008	B <sup>(1)</sup>	05/01/2014		nmon ock	25,000		25,000		D			
Non- Qualified Stock Option (right to buy)	\$17.76								07/27/2008	3 <sup>(2)</sup>	07/27/2017		nmon ock	6,000		6,000	)	D			
Non- Qualified Stock Option (right to buy) <sup>(3)</sup>	\$20.15								01/29/200	07	09/29/2015		nmon ock	6,027		6,027	,	D			
Non- Qualified Stock Option (right to	\$22.06								01/29/200	07	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: 05/15/2008 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.