FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OME	3 APPROVAL							
OMB Numbe	er: 3235-0	3235-0287						
Estimated average burden								
hours per re	sponse:	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. Name and Address of Reporting Person* <u>Trowbridge Stephen A</u>						2. Issuer Name and Ticker or Trading Symbol ANGIODYNAMICS INC [ANGO]									ck all applica Director	able)	g Perso	on(s) to Issue	ner
(Last) 14 PLAZA) (First) (Middle) LAZA DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 07/18/2018								X	below)	Officer (give title below) SVP and Gener		Other (spelow) Counsel	pecify
(Street) LATHAM NY 12110				4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Ind Line)						
(City)	(Sta	ite) (2	Zip)																
1. Title of Security (Instr. 3) 2. Trans. Date						3. Transaction Code (Instr. 8) 3. Use of the code of				(A) or	5. Amoun Securities Beneficia Owned Fo	5. Amount of Securities Beneficially Owned Following		: Direct I · Indirect E str. 4) (7. Nature of Indirect Beneficial Ownership				
									Code	v	Amount (A) or (D)		Price	Reported Transacti (Instr. 3 a				Instr. 4)	
Common Stock 07/18					3/2018	3/2018		A		4,719(1)	A	\$0	37,891			D		
		ר	Γable II - I								sed of, o				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. Transac Code (II		of		6. Date Exercisa Expiration Date (Month/Day/Year		•	7. Title and Amor of Securities Underlying Derivative Secur (Instr. 3 and 4)		s Security	8. Price of Derivative Security (Instr. 5)	9. Numbo derivativ Securitie Beneficia Owned Following Reported Transact (Instr. 4)	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	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)	\$20.93	07/18/2018			A		15,032		07/18/201	9 ⁽²⁾	07/18/2028		nmon ock	15,032	\$0	15,03	32	D	
Performance Right	(3)	07/18/2018			A		9,437		(3)		(3)		nmon ock	9,437	\$0	9,43	7	D	

Explanation of Responses:

- 1. This acquisition of 4,719 shares of common stock ("Common Stock") of AngioDynamics, Inc. represents 4,719 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 annual installments beginning on July 18, 2019, such that 25% of the restricted stock units will vest on each of July 18, 2019, 2020, 2021 and 2022.
- 2. These stock options vest in four equal annual installments beginning on July 18, 2019, such that 25% of the options will vest on each of July 18, 2019, 2020, 2021 and 2022.
- 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 ending May 31, 2021. Any shares that do not vest at the end of the performance period will be forfeited.

/s/ Stephen A. Trowbridge 07/20/2018

** 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.