FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| shington, D.C. 20549 | | | | |
|----------------------|----------|-----|-------|--|
| | shinaton | D C | 20549 | |

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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* Tarnoff Michael E | | | | 2. Issuer Name and Ticker or Trading Symbol ANGIODYNAMICS INC [ANGO] | | | | | | | | (Che | ck all app | ionship of Reportin all applicable) Director | | 10% Ov | wner | | | |
|---|-----|--|----------|--|---|--|--|--|--|-----------|--|--|---|---|--|---|--------------------|--|--|--|
| (Last) | (Fi | rst) (I | Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 07/17/2024 | | | | | | | | | Office below | er (give title v) | | Other (s below) | specify | | |
| 14 PLAZA DRIVE | | | | 4. If A | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | |
| (Street) LATHAM NY 12110 | | | | | | | | | | | | 5 | Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | | |
| (City) | (St | ate) (2 | Zip) | | Rul | le 10 |)b5- | 1(c) | Tran | sac | tion Indi | icati | on | · | | | | | | |
| | | | | | | Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. | | | | | | | | | | | | | | |
| | | Table | I - No | n-Deriva | ative S | Secu | rities | Acq | uired, | , Dis | posed of | , or | Ben | eficia | ly Own | ed | | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Date) | | | | | Execution | | | 3. Transaction Code (Instr. 8) 4. Securities Act Disposed Of (D) 5) | | | | Acquired (A) or D) (Instr. 3, 4 and | | Beneficially Owned Following | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | Code | v | Amount | (A (D |) or)) | Price | | ed ction(s) and 4) | | | (Instr. 4) | | | |
| Common Stock 07/17/2 | | | | | 2024 | 2024 | | A | | 20,541(1) | | A | \$ <mark>0</mark> | 6: | 65,703 | | D | | | |
| | | Tal | ble II - | | | | | | | | osed of, convertib | | | | / Owne | d | | | | |
| 1. Title of Derivative Security (Instr. 3) Conversion or Exercity Price of Derivative Security | | 3. Transaction Date (Month/Day/Year) | if any | emed ion Date, /Day/Year) | 4. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Insti 3 and 4) | | f [| s. Price of Derivative Security Instr. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | Owners Form: Direct (or Indir (I) (Inst | Ownership | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | v | (A) | (D) | | | Expiration Date | Title | or Nur of | ount mber | | | | | | |

Explanation of Responses:

1. The acquisition of 20,541 shares of common stock of AngioDynamics, Inc. ("AngioDynamics") represents 20,541 restricted stock units granted as regular annual compensation for service as a director of AngioDynamics. The restricted stock units immediately vested at the time of grant.

/s/ Stephen A. Trowbridge, Attorney in Fact

07/19/2024

** 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.