Edgar Filing: MGC DIAGNOSTICS Corp - Form 4

MGC DIAGN	NOSTICS Co	rp									
Form 4											
November 04	, 2014										
FORM	4									PPROVAL	
	UNIII	ED STATES		ITIES Al hington,			NGE (COMMISSION	OMB Number:	3235-0287	
Check this if no long							Expires:	January 31,			
subject to	F CHAN	F CHANGES IN BENEFICIAL OW					Estimated a	2005 average			
Section 16		SECUR	ITIES				burden hou				
Form 4 or Form 5			~ • •		a	-			response	0.5	
obligation		-					-	e Act of 1934,			
may continue.											
<i>See</i> Instruction 30(h) of the Investment Company Act of 1940 1(b).											
(Print or Type R	esponses)										
1. Name and Address of Reporting Person <u>*</u> STRUIK HENDRIK			2. Issuer Name and Ticker or Trading Symbol MGC DIAGNOSTICS Corp [MGCD]				g	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
		(Check an applicable)									
(Last)	(First)	(Middle)	3. Date of	Earliest Tra	insaction			X Director		Owner	
			(Month/Day/Year)					Officer (give title Other (specify below) below)			
726 THOMAS COURT			11/01/2014					0010(())	0010(0)		
(Street) 4			4. If Ame	4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
Filed(Month/Day/Year) Applicable Line) _X_ Form filed by One								ne Reporting Person ore than One Reporting			
(City)	(State)	(Zip)									
(City)	(Buile)	(Zip)	Table	e I - Non-Do	erivative S	ecuri	ties Acc	uired, Disposed of	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)		ransaction Date 2A. Deemed onth/Day/Year) Execution Date any (Month/Day/Year)			Date, if Transaction(A) or Disposed of Code (D)				Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership	
			(A) Reported Transact		Following Reported Transaction(s) (Instr. 3 and 4)	(Instr. 4)	(Instr. 4)				
Common Stock	11/01/2014			A	740	A	\$ 6.75	22,054	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	rcisable and	7. Tit	le and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	TransactionNumber Ex		Expiration I	Expiration Date		unt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day	/Year)	Unde	rlying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8) Derivativ	-		Secu	rities	(Instr. 5)	Bene
, ,	Derivative		· · · ·		Securitie	s		(Instr	. 3 and 4)	. ,	Owne
	Security				Acquired			X	, , ,		Follo
	~~~~				(A) or	-					Repo
					Disposed	1					Trans
					of (D)						(Instr
					(Instr. 3,						(IIISti
					(insu: 5, 4, and 5)						
					4, and 3)						
									Amount		
							т · .·		or		
						Date	Expiration	Title	Number		
						Exercisable	Date		of		
				Code V	/ (A) (D)	1			Shares		
				2	() (2)						
Reno	rtina O	whore									

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## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
STRUIK HENDRIK 726 THOMAS COURT LIBERTYVILLE, IL 60048	Х							
Signatures								
Thomas G. Lovett, Attorney-in Struik	-fact for ]	Hendrik	1	1/04/2014				
**Signature of Reporting		Date						

## **Explanation of Responses:**

* 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.