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MGC DIAGN Form 4 February 03,	NOSTICS Corp 2015										
FORM	4								-	PPROVAL	
	UNITED	STATES		ITIES Al hington,			NGE (COMMISSION	OMB Number:	3235-0287	
Check this box if no longer subject to Section 16. Form 4 or				GES IN BENEFICIAL OWNERSHIP (SECURITIES					Expires: January 3 200 Estimated average burden hours per		
Form 5 obligation may conti <i>See</i> Instru 1(b).	Filed purs s Section 17(a	a) of the P	ublic Ut		ing Com	ipany	Act of	ge Act of 1934, f 1935 or Sectio 40	n response	0.5	
(Print or Type R	esponses)										
N			2. Issuer Name and Ticker or Trading Symbol MGC DIAGNOSTICS Corp [MGCD]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) 350 OAK GI	(First) (M ROVE PARKWA		3. Date of (Month/Da 02/01/20	-	ansaction			Director X Officer (give below) EVP		• Owner er (specify)	
Filed(Mon				endment, Date Original onth/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
SAINT PAU	L, MN 55127							Person		porting	
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Acc	quired, Disposed of	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Executior any	n Date, if	3. Transactic Code (Instr. 8) Code V	on(A) or Di (D) (Instr. 3,	spose	d of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial	
Common Stock	02/01/2015			F		D	\$ 6.88	13,888	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 Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Under Secur	rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships							
reporting officer runner runn ess	Director	10% Owner	Officer	Other				
WINNEKINS WESLEY W 350 OAK GROVE PARKWAY SAINT PAUL, MN 55127			EVP (Finance), CFO					
Signatures								
Suzette Mcnally, Attorney-in-Fac Winnekins	02/03/2015							
<u>**</u> Signature of Reporting	g Person		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.