Edgar Filing: ENDOLOGIX INC /DE/ - Form 4

ENDOLOGI	X INC /DE/										
Form 4											
June 01, 2015	5										
FORM	Λ									PPROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287			
Check this			8 /	Expires:	January 31						
if no longe	er STATE	MENT O	F CHAN	GES IN E		2005					
subject to STATEMENT OF CHARGES IN DETERTICIAL OWN Section 16. SECURITIES								Estimated average burden hours per response 0.5			
Form 4 or											
Form 5							10000130	0.0			
obligation	^s Section 17						-	f 1935 or Sectio	m		
may conti <i>See</i> Instru- 1(b).	nue.			vestment (•	• •					
(Print or Type R	esponses)										
1. Name and Address of Reporting Person [*]			2. Issuer Name and Ticker or Trading				g	5. Relationship of Reporting Person(s) to			
DeJohn Jose	Symbol					Issuer					
	ENDOLOGIX INC /DE/ [ELGX]					(Check all applicable)					
(Last)					k un applicable)						
			(Month/D	ay/Year)				Director 10% Owner			
2 MUSICK			05/28/2015					XOfficer (give titleOther (specify below) below) VP- Global Sales			
	(Street)		4 If Ame	ndment Dat	e Original			6 Individual or I	oint/Group Fili	ng(Check	
	4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line)					
			1 neu(wion	(II/Day/1Cal)				_X_ Form filed by	One Reporting Po	erson	
IRVINE, CA	92618								More than One R		
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of	2. Transaction Da			3.	4. Securi			5. Amount of	6. Ownership		
Security	(Month/Day/Year		on Date, if	Transactio				Form: Direct	Indirect		
(Instr. 3)		any (Month)	Day/Year)	CodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5)				Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership	
		(INIOIIII)	Day/ I cal)	(111501.0)	(11150. 5,	4 anu	5)	Following	(Instr. 4)	(Instr. 4)	
								Reported	((
						(A) or		Transaction(s)			
				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common					7,535						
Stock	05/28/2015	А		(1)	А	\$0	140,414	D			
Common Stock	05/28/2015			А	7,535 (2)	А	\$0	147,949	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.

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 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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. Number of orDerivative 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 o Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amoun or Numbe of Shar
Option to Purchase	\$ 16.59	05/28/2015		А	18,854	06/28/2015 <u>(3)</u>	05/28/2025	Common Stock	18,85

Reporting Owners

Reporting Owner Name / Address		Rel					
	Director	10% Owner	Officer	Other			
DeJohn Joseph A. 2 MUSICK IRVINE, CA 92618			VP- Global Sales				
Signatures							
Joseph A. DeJohn by Shelley H Person	06/01/2015						
**Signature of Reporting Person							

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).
- (1) Time based restricted stock unit award.
- (2) Performance restricted stock unit award based on a regulatory milestone.
- (3) Options vest ratably over forty-eight months.

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.