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LUNA INNOVATIONS INC

Form 3 June 02, 2006

FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *

C/O LUNA INNOVATIONS

INCORPORATED, Â 2851 COMMERCE STREET

A Carilion Health System

(Last)

(First)

(Middle)

Statement

(Month/Day/Year)

06/02/2006

2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol LUNA INNOVATIONS INC [LUNA]

4. Relationship of Reporting

Person(s) to Issuer

5. If Amendment, Date Original

Filed(Month/Day/Year)

(Check all applicable)

Director Officer (give title below) (specify below)

X 10% Owner Other

6. Individual or Joint/Group Filing(Check Applicable Line)

X Form filed by One Reporting

Person

Form filed by More than One

Reporting Person

4. Nature of Indirect Beneficial

BLACKSBURG, VAÂ 24060

(Street)

(City) (State)

(Instr. 4)

1. Title of Security

(Zip)

Table I - Non-Derivative Securities Beneficially Owned 2. Amount of Securities

Beneficially Owned

(Instr. 4)

3.

Ownership

Ownership (Instr. 5)

Form: Direct (D)

or Indirect (I)

(Instr. 5)

Â Common Stock 2,228,198 D

Reminder: Report on a separate line for each class of securities beneficially

owned directly or indirectly.

SEC 1473 (7-02)

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Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security 2. Date Exercisable and (Instr. 4)

Expiration Date

(Month/Day/Year)

3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)

4. Conversion or Exercise Price of

5. Ownership Form of Derivative

6. Nature of Indirect Beneficial Ownership

(Instr. 5)

Derivative Security:

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	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Security	Direct (D) or Indirect (I) (Instr. 5)	
Senior Convertible Promissory Notes	12/30/2009	12/30/2012	Common	1,065,736	\$ 4.6916	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
•	Director	10% Owner	Officer	Other
Carilion Health System				
C/O LUNA INNOVATIONS INCORPORATED	â	ÂΧ	â	â
2851 COMMERCE STREET	А	АЛ	А	A
BLACKSBURG, VA 24060				

Signatures

/s/ Aaron S. Hullman, Esq.,
Attorney-in-Fact
06/02/2006

**Signature of Reporting Person Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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.

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