Edgar Filing: NovaBay Pharmaceuticals, Inc. - Form 4

NovaBay Pharmaceuticals, Inc. Form 4 January 06, 2016

January 06,	2016											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL			
	Washington, D.C. 20549							N OMB Number:	3235-	0287		
Check t if no lor subject Section Form 4	nger STATE N 16.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								Expires: January Estimated average burden hours per response		
Form 4 or Form 5 obligations may continue. See Instruction 1(b). 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 SIECZKA	2. Issuer Name and Ticker or Trading Symbol NovaBay Pharmaceuticals, Inc. [NBY]					5. Relationship of Reporting Person(s) to Issuer						
						(Check all applicable)						
(Last) C/O NOVA PHARMA	3. Date of Earliest Transaction (Month/Day/Year) 01/04/2016				X_ Director 10% Owner Officer (give title Other (specify below) below)							
HORTON	STREET, SUITE	550										
	(Street)		4. If Amendment, Date Original 6. Individ					6. Individual or	ual or Joint/Group Filing(Check			
EMEDXX			Filed(Mo	onth/Day/Yea	r)				y One Reporting I y More than One F			
ENIEKIV	LLE, CA 94608							Person		1 0		
(City)	(State)	(Zip)	Tab	ole I - Non-I	Derivative	Secu	rities A	cquired, Disposed	of, or Beneficia	ally Owne	d	
(Instr. 3) any		Execution any	ion Date, if Transactic Code /Day/Year) (Instr. 8)		4. Securities nAcquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or Amount (D) Price		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature Indirect Beneficia Ownersh (Instr. 4)	al ip		
Domindar Da	port on a congrate lin	a for each a	ass of see	unition hand	Finially or	nod d	raath	ar indiractly				
Kenninder. Ke	port on a separate lin			unties bener	-		-	spond to the colle	ection of	SEC 1474		

required to respond to the collection of SEC 14/4 (9-02) sec 14/4 (9-02) sec 14/4

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

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

number.

1. Title of Derivative Security (Instr. 3)	e Conversion (Month/Day/Year) Execution or Exercise any		Execution Date, if	4. Transactic 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	ŕ) Date Exercisable	Expiration Date	Title	Amount or Number of Share		
Stock Option (right to buy) (1)	\$ 2.02	01/04/2016		A	16,032	01/04/2016(2)	01/04/2026	Common Stock	16,032		
Reporting Owners											
Reporting Owner Name / Address				Relationships Director 10% Owner Officer Other							
SIECZKAREK MARK M C/O NOVABAY PHARMACEUTICALS, INC. 5980 HORTON STREET, SUITE 550 EMERYVILLE, CA 94608			ILS, INC. X								
0:											

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Signatures

/s/ Justin Hall as attorney in fact for Mark Sieczkarek 01/06/2016

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) Granted pursuant to the 2007 Omnibus Incentive Plan and the 2016 Non-Employee Director Compensation Plan
- (2) Stock options will vest in equal monthly installments over one year starting from the date of grant
- (3) On December 18, 2015, the common stock of NovaBay Pharmaceuticals reverse split 1-for-25, and is reflected accordingly in both the number of underlying option shares and exercise price of the award.

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.