Edgar Filing: ICU MEDICAL INC/DE - Form 4

ICU MEDIC.	AL INC/DE										
Form 4											
February 06,	2017										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								PPROVAL			
UNITED STATES SECURITIES AND EACHANGE COMMISSION							OINE	3235-0287			
Check thi	s box		Was	hington,	D.C. 205	549			Number:		
if no longer									Expires:	January 31, 2005	
subject to		MENIU	r Chan	GES IN BENEFICIAL OWNERSH				NERSHIP OF	Estimated a		
Section 16.				SECURITIES					burden hours per		
Form 4 or Form 5		urguant to	Section 16	S(n) of the	Socuriti	os Er	zohona	x_{2} Act of 1034	response	0.5	
obligation	· · · · · ·							ge Act of 1934, f 1935 or Sectio	n .		
may conti	nue.		of the Inv	•	•	- ·			/11		
See Instru 1(b).	iction	50(11)	of the m	vestillent v	compan.	y 1101	0117	10			
1(0).											
(Print or Type R	lesponses)										
		- *								<i></i>	
RIGGS STEVEN Symbol				Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer			
(Last)	ast) (First) (Middle) 3. Date of			Earliest Transaction							
			(Month/Da	•				Director X Officer (give		6 Owner er (specify	
951 CALLE AMANECER 02/05/20			2017				below) below)				
								V	P Operations		
(Street) 4. If Ame			4. If Amer	Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
			Filed(Mon	th/Day/Year)				Applicable Line)			
~ ~ ~ ~ ~								_X_Form filed by	One Reporting Pe More than One Re		
SAN CLEM	ENTE, CA 926	573						Person		porting	
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficial	lly Owned	
1.Title of	2. Transaction D	ate 2A. Dee	emed	3.	4. Securi	ties		5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Yea		on Date, if TransactionAcquired (A) or					Securities		Indirect	
(Instr. 3) at			/Day/Year)	CodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5)			Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership		
		(WORLD	Day/ I cal)	(Instr. 8)	(msu. 5,	+ anu	5)	Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported			
						or		Transaction(s) (Instr. 3 and 4)			
				Code V	Amount	(D)	Price	(11150. 5 and 4)			
Common	02/05/2017			М	834	А	\$0	834	D		
Stock (1)							, .				
Common Stock	02/05/2017			F	355	D	\$0	479	D		

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

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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. Transactio Code (Instr. 8)	5. Number onof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration D (Month/Day/	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Common Stock (1)	\$ 0 <u>(2)</u>	02/05/2017		М	834	(3)	02/05/2019	Common Stock	834	9

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
RIGGS STEVEN 951 CALLE AMANECER SAN CLEMENTE, CA 92673			VP Operations				
Signatures							
By: Paula Darbyshire For: Steve Riggs	n C.	02/06/2	2017				

**Signature of Reporting 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).

(1) These securities are Restricted Stock Units.

(2) There is neither a purchase price nor an exercise price for the Restricted Stock Units.

(3) One third of the Units subject to the award shall vest on each of the first, second, and third anniversaries of the grant date.

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.