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NovaBay Pharmaceuticals, Inc. Form 4

December 15	5, 2014										
FORM	4 UNITE) STATES					NGE C	COMMISSION	OMB AF OMB Number:	PROVAL 3235-0287	
Washington, D.C. 20549Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue.STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIESFiled pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations 								Expires: Estimated a burden hou response			
(Print or Type R	Responses)										
1. Name and Address of Reporting Person <u>*</u> PAULSON THOMAS J			2. Issuer Name and Ticker or Trading Symbol NovaBay Pharmaceuticals, Inc. [NBY]				-	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
	(First) BAY EUTICALS, IN TREET, SUIT		3. Date of (Month/D 12/12/20	•	insaction			Director X Officer (give below)		Owner er (specify	
				endment, Date Original nth/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 				
(City)	(State)	(Zip)						Person			
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	ate 2A. Dee r) Executio any	2A. Deemed 3. 4. Securities Acquired 5. Amount of Execution Date, if Transaction(A) or Disposed of (D) Securities any Code (Instr. 3, 4 and 5) Beneficially (Month/Day/Year) (Instr. 8) Owned Following (A) Transaction(s) Transaction(s) Transaction(s)			6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of				
Common Stock	12/12/2014			Code V P	Amount 10,000	(D) A	Price \$ 0.68	(Instr. 3 and 4) 68,210	D		

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02) 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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Amou Unde Secur	le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne 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					
	Director	10% Owner	Officer	Other		
PAULSON THOMAS J C/O NOVABAY PHARMACEUTICALS, INC. 5980 HORTON STREET, SUITE 550 EMERYVILLE, CA 94608			CFO			
Signatures						
/s/ Justin Hall as attorney in fact for Thomas Paulson		12/15/2014				
**Signature of Reporting Person		Date				
Explanation of Responses:						

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.