Edgar Filing: NovaBay Pharmaceuticals, Inc. - Form 4

NovaBay Pharmaceuticals, Inc. Form 4 January 26, 2017

January 26,	2017											
FORM	ΠΔ									OMB A	PPROV	۹L
	UNITED	STATES		RITIES A shington			NGE	COMMISSIO	```	OMB Number:	3235	-0287
Check th if no lon subject t Section Form 4 d	ger STATE o STATE 16.							WNERSHIP OI	F E k	Expires: Janu Estimated average burden hours per response		ry 31, 2005 0.5
Form 5 obligation may con <i>See</i> Instru 1(b).	tinue. Section 17	(a) of the l	Public U		ding Cor	npan	y Act	nge Act of 1934, of 1935 or Secti 940	,	·		
(Print or Type	Responses)											
1. Name and Address of Reporting Person <u>*</u> PAULSON THOMAS J			2. Issuer Name and Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer					
		NovaBay Pharmaceuticals, Inc. [NBY]					(Check all applicable)					
(Last) (First) (Middle) C/O NOVABAY PHARMACEUTICALS, INC., 2000 POWELL STREET, SUITE 1150			3. Date of Earliest Transaction (Month/Day/Year) 01/25/2017				Director 10% Owner X Officer (give title Other (specify below) below) CFO					
				4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
EMERYVI	LLE, CA 94608							Form filed by Person	/ More	e than One R	eporting	
(City)	(State)	(Zip)	Tab	ole I - Non-l	Derivative	Secu	rities A	cquired, Disposed	of, o	r Beneficia	lly Owne	d
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if any (Month/Day/Year)		Code (Instr. 8)	1 ()) 5)	SecuritiesForBeneficially(DOwned(D)		wnership n: Direct or Indirect tr. 4)	7. Nature Indirect Benefici Ownersh (Instr. 4)	al iip	
Reminder: Rej	port on a separate lin	e for each cl	ass of sec	urities bene	ficially own	ned di	rectly o	or indirectly.		- - f	TO 1474	

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.

 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)	ive Expiration Date (Month/Day/Year) ed (A) or ed of (D)		7. Title and Amount Underlying Securitie (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amou Numb Shares
stock option (right to buy) <u>(1)</u>	\$ 3.6	01/25/2017		A	116,000	01/31/2018(2)	01/25/2027	Common Stock	116,(

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Reporting Owners

Reporting Owner Name / Address	Relationships					
1	Director	10% Owner	Officer	Other		
PAULSON THOMAS J C/O NOVABAY PHARMACEUTICALS, INC. 2000 POWELL STREET, SUITE 1150 EMERYVILLE, CA 94608			CFO			
Signatures						
/s/ Justin Hall as attorney in fact for Thomas Paulson		01/26/2017				
**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) Options granted pursuant to 2007 Omnibus Incentive Plan
- (2) the Option will vest on January 31, 2018, in direct proportion to the percentage achievement of the stated 2017 corporate goals, as approved and determined by the Board.

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.