Edgar Filing: LIDSKY PAUL F - Form 4

| LIDSKY PAU Form 4 | | | | | | | | | | | | |
|--|---|---|--|--|------------------------|---|----------|---|--|--|--|--|
| December 18 FORM Check this | 4 UNITED S | UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | | | | |
| if no longe subject to Section 16 Form 4 or Form 5 obligation may contin <i>See</i> Instruct 1(b). | 5. Filed purs nue. Section 17(a | STATEMENT OF CHANGES IN 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 | | | | | | | | Expires: 2005 Estimated average burden hours per response 0.5 | | |
| (Print or Type Responses) 1. Name and Address of Reporting Person <u>*</u> LIDSKY PAUL F | | | 2. Issuer Name and Ticker or Trading Symbol IMAGE SENSING SYSTEMS INC | | | | | 5. Relationship of Reporting Person(s) to Issuer | | | | |
| (Last) | [isns] | | | | | EMS | INC | (Check all applicable) <u>X</u> _Director10% Owner Officer (give title0ther (specify balaw) | | | | |
| 1600 UNIVE 500 | (Street) | , SUITE | | | o Original | | | below) | below) | | | |
| · · · · · · · · · · · · · · · · · · · | | | | ndment, Date Original hth/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 Person | | | | |
| (City) | (State) | (Zip) | Table | I - Non-De | erivative S | Securi | ties Ac | quired, Disposed o | of, or Beneficia | lly Owned | | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | Executio any | | 3. Transactic Code (Instr. 8) Code V | Disposed (Instr. 3, | l (A) of l of (D 4 and (A) or |)) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | | |
| Common Stock | 12/14/2018 | | | A | 1,153 | A | \$ 0 | 37,797 | D | | | |
| Reminder: Repo | ort on a separate line | for each cl | ass of secur | ities benefi | cially own | ed dir | ectly 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)

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| 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. Transactic Code (Instr. 8) | 5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, | | ate | 7. Title Amoun Underl Securit (Instr. | nt of lying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Owno Follo Repo Trans (Instr |
|---|---|---|---|--|--|---------------------|--------------------|---|--|---|---|
| | | | | Code V | 4, and 5) (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Addre | ess | Relationships | | | | | | |
|---|------------|---------------|---------|-------|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | |
| LIDSKY PAUL F 1600 UNIVERSITY AVE V SUITE 500 SAINT PAUL, MN 55104 | V X | | | | | | | |
| Signatures | | | | | | | | |
| By: Paul F. Lidsky | 12/18/2018 | | | | | | | |
| **Signature of | Date | | | | | | | |

Reporting Person

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.