Edgar Filing: Accelerate Diagnostics, Inc - Form 4

Accelerate I	Diagnostics, Inc									
Form 4										
June 02, 20										
FORM	FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								PPROVAL	
. •	•••• UNITED	STATES		RITIES A			COMMISSION	Number:	3235-0287	
Check the	his box		VV à	isinington	, D.C. 20	1347			January 31	
if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OW					WNERSHIP OF	Expires:	2005			
Section	16.	SECURITIES						Estimated average burden hours per		
Form 4 Form 5							response	. 0.5		
obligatio	ong *						of 1935 or Section	n		
may cor	itinue.			•	•	ny Act of 1		511		
<i>See</i> Inst 1(b).	ruction	00(11)			. compu					
(Print or Type	Responses)									
1. Name and	Address of Reporting	Person *	2 Icen	er Name and	l Ticker or	Trading	5. Relationship o	of Reporting Per	rson(s) to	
REICHLING STEVEN			2. Issuer Name and Ticker or Trading Symbol			Issuer				
			•	rate Diagi	nostics, I	nc [AXDX	[]	1 11 11 11	`	
(Last)	(First) (Middle)	3. Date of	of Earliest T	ransaction		(Che	ck all applicabl	e)	
			(Month/	Day/Year)			Director		% Owner	
C/O ACCE			05/29/2	2014			XOfficer (giv below)	ve title Oth below)	ner (specify	
	TICS, INC., 3950							CFO		
470	Y CLUB ROAD,	SUITE								
470										
			4. If Amendment, Date Original Filed(Month/Day/Year)			6. Individual or Joint/Group Filing(Check				
			rneu(mo	onth/Day/Yea	r)		Applicable Line) _X_ Form filed by	One Reporting P	erson	
TUCSON,	AZ 85714						Form filed by Person	More than One R	eporting	
(City)	(State)	(Zip)			~ • •	a				
-		-					cquired, Disposed o		•	
1.Title of Security	2. Transaction Date (Month/Day/Year)	e 2A. Deemed Execution Date, if				5. Amount of Securities	orm: Direct	7. Nature of Indirect		
(Instr. 3)	(infondit Dug) Four)	any		Code Disposed of (D)			(D) or Indirect			
		(Month/Da	y/Year)	(Instr. 8)	(Instr. 3, 4	4 and 5)		(I) (I)	Ownership	
							Following Reported	(Instr. 4)	(Instr. 4)	
						(A)	Transaction(s)			
				Code V	Amount	or (D) Price	(Instr. 3 and 4)			
Reminder: Re	port on a separate line	e for each cla	ass of sec	urities benef	ficially ow	ned directly	or indirectly.			

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. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	erivative Expiration Date ecurities (Month/Day/Year) cquired (A) Disposed of 0) nstr. 3, 4,		7. Title and Amount Underlying Securitie (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amou or Numb of Sha
Employee Stock Option (right to buy)	\$ 14.92	05/29/2014 <u>(1)</u>		А	16,161	02/26/2015 <u>(2)</u>	02/26/2024	Common Stock	16,1

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Reporting Owners

Reporting Owner Name / Address	Relationships				
	Director	10% Owner	Officer	Other	
REICHLING STEVEN C/O ACCELERATE DIAGNOSTICS, INC. 3950 S. COUNTRY CLUB ROAD, SUITE 470 TUCSON, AZ 85714			CFO		
Signatures					
/s/ David Hinnant,					

attorney-in-fact 06/02/2014

**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).

The option grant was approved by Accelerate Diagnostics, Inc.'s (the "Company") Board of Directors on February 26, 2014, subject to
 (1) stockholder approval of an amendment to the stock option plan under which the option was granted. The Company's stockholders approved the amendment at the Company's 2014 Annual Meeting of Stockholders, which was held on May 29, 2014.

(2) The option is scheduled to vest on February 26, 2015, the first anniversary of the date of grant.

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.