

FONAR CORP
Form 5
August 02, 2006

FORM 5

**UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549**

OMB APPROVAL

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).
Form 3 Holdings Reported Form 4 Transactions Reported

ANNUAL 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

1. Name and Address of Reporting Person *
Terry David B

2. Issuer Name and Ticker or Trading Symbol
FONAR CORP [FONR]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

Director 10% Owner
 Officer (give title below) Other (specify below)
Secretary

(Last) (First) (Middle)
BOX 1439

(Street)

3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year)
06/30/2006

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Reporting
(check applicable line)

EAST QUOGUE, NY 11942

Form Filed by One Reporting Person
 Form Filed by More than One Reporting Person

(City) (State) (Zip)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	(A) or (D)	Price	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
common stock	^	^	^	^	^	^	101	D	^
common stock	^	^	^	^	^	^	192	I	see note 1 (1)
class a preferred stock	^	^	^	^	^	^	19	D	^
class a preferred	^	^	^	^	^	^	38	I	see note 2 (2)

stock

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. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Amount or Number of Shares
stock options	\$ 1.5	Â	Â	Â	Â Â	05/01/2001 05/01/2011	common stock	2,029
stock options	\$ 1.875	Â	Â	Â	Â Â	07/01/2001 07/01/2011	common stock	459
stock options	\$ 1.125	Â	Â	Â	Â Â	12/01/2001 12/01/2011	common stock	2,964
stock options	\$ 1.375	Â	Â	Â	Â Â	04/01/2002 04/01/2012	common stock	834
stock options	\$ 1.33	Â	Â	Â	Â Â	08/01/2002 08/01/2012	common stock	660
stock options	\$ 1	Â	Â	Â	Â Â	10/01/2002 10/01/2012	common stock	1,094
stock options	\$ 1.125	Â	Â	Â	Â Â	12/27/2000 12/27/2010	common stock	13,332

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Terry David B BOX 1439 EAST QUOGUE, NY 11942	Â	Â	Â Secretary	Â

Signatures

David B Terry

08/02/2006

**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) note 1: consists of shares held as custodian or trustee for reporting persons children
- (2) note 2: consists of shares held as custodian or trustee for reporting persons children

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.