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BSD MEDICAL	CORP										
Form 4 February 19, 201:	5										
								OMB A	PPROVAL		
FORM 4UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549Check this box if no longer subject to 									3235-0287		
								Expires: Estimated a burden hou response	Expires:January 31, 2005Estimated average burden hours per response0.5		
(Print or Type Respon	nses)										
1. Name and Address of Reporting Person <u>*</u> Hoglin Jennifer R			Symbol	er Name an IEDICAL		-	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) ((First) (Middle) 3. Date of Earliest Transaction						(Check an applicable)				
8883 DAYBREAKER DRIVE			(Month/Day/Year) 02/19/2015				Director 10% Owner X Officer (give title Other (specify below) below) VP of Marketing				
			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					
PARK CITY, U	Г 84098						Form filed by Person	More than One Ro	eporting		
(City) ((State)	(Zip)	Tab	ole I - Non-J	Derivative	Securities A	Acquired, Disposed	of, or Beneficia	lly Owned		
	ansaction Date th/Day/Year)	Execution any	Date, if	Code (Instr. 8)	4. Securit mAcquired Disposed (Instr. 3, 4	(A) or of (D) 4 and 5) (A) or	Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Reminder: Report on	a separate line	for each cla	ass of sec	urities bene	ficially own	ned directly	or indirectly.				
					Perso inforn requir	ns who res nation cont ed to resp lys a curre	spond to the colle tained in this form ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)		

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr.	8)	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)					
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount Number Shares
Option to purchase common stock	\$ 0.36	02/17/2015		А		200,000 (1)		02/17/2016	02/17/2025	Common Stock	200,00

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Hoglin Jennifer R 8883 DAYBREAKER DRIVE PARK CITY, UT 84098			VP of Marketing					

Signatures

Jennifer R Hoglin **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 vest at a rate of 1/3 per year for a period of 3 years.

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.