Edgar Filing: ASTROTECH Corp \WA\ - Form 4

ASTROTEC	'H Corp \WA\											
Form 4												
April 09, 201	15											
FORM	FORM 4 LINITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB AF	PROVAL		
UNITED STATES SECURITIES AND EXCHANGE Washington, D.C. 20549						GE C	OMMISSION	OMB Number:	3235-0287			
Check the		0 /	Expires:	January 31,								
if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWNE						NERSHIP OF	200					
	subject to Section 16. SECURITIES								Estimated average burden hours per			
Form 4 or										0.5		
Form 5	Filed pur	suant to S	Section 1	6(a) of the	e Securitie	s Exc	change	e Act of 1934,				
obligation may cont				•	•	•		1935 or Section	ı			
See Instru		30(h)	of the In	vestment	Company	Act of	of 194	0				
1(b).												
(Print or Type F	Responses)											
1 Name and A	ddress of Reporting	Derson *	2.1		m: 1 m	1.		5 Palationship of	Deporting Der	on(s) to		
Pickens The		2. Issuer Name and Ticker or Trading					5. Relationship of Reporting Person(s) to Issuer					
Tiekens Thomas Doone III			Symbol ASTROTECH Corp \WA\ [ASTC]									
					(Check all applicable)							
(Last)	(First) (N	/liddle)		of Earliest Transaction				X Director X 10% Owner				
401 CONGI	PESS AVENUE	SUITE	(Month/D 04/07/2	-				X Director X Officer (give		o Owner er (specify		
401 CONGRESS AVENUE, SUITE (1650			04/07/20	515				below) below)				
1050								Chief E	xecutive Offic	er		
(Street)			4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check				
	• • •						Applicable Line)					
	X 80801							_X_ Form filed by O Form filed by M				
AUSTIN, T	X /8/01							Person		porting		
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative Se	curiti	es Acqu	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of	2. Transaction Date	2A. Deer	ned	3.	4. Securitie			5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year)	Execution Date, in		Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)					Form: Direct In			
(Instr. 3)			any (Month/Day/Year)		(Instr. 3, 4 a	and $5)$		2	< / <	Beneficial Ownership		
			Jay/ I Cal)	(Instr. 8)				Following	(Instr. 4)	(Instr. 4)		
						(A)		Reported	· /	· · · ·		
						(A) or		Transaction(s)				
				Code V	Amount	(D)	Price	(Instr. 3 and 4)				
Common	04/07/2015	04/07/2	015	А	665,000	А	\$0	4,398,746	D			
Stock	01/01/2013	0112	015	Λ	005,000	Α	ψŪ	7,570,740	D			
Common							\$					
Stock	04/07/2015	04/07/2	015	F	263,340	D	\$ 3.2	4,135,406	D			

Reminder: Report on a separate line for each class of securities beneficially owned 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.

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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. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Under Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Pickens Thomas Boone III 401 CONGRESS AVENUE SUITE 1650 AUSTIN, TX 78701	Х	Х	Chief Executive Officer				
Signatures							
/s/ Thomas Boone Pickens III	04/09	9/2015					
<u>**</u> Signature of Reporting Person	Da	ate					

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.