SANUWAVE Health, Inc.

Form 4

September 30, 2016

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

OMB

OMB APPROVAL

Number:

3235-0287

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January 31, 2005

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SECURITIES

obligations may continue. See Instruction

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(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * Richardson Kevin A II

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to Issuer

Symbol

SANUWAVE Health, Inc. [SNWV]

(Check all applicable)

(Last)

(First)

(Middle)

3. Date of Earliest Transaction (Month/Day/Year)

X_ Director Officer (give title below)

10% Owner Other (specify

100 CUMMINGS CENTER, SUITE

(Street)

332D

4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check

Filed(Month/Day/Year)

10/01/2015

Applicable Line) _X_ Form filed by One Reporting Person

Form filed by More than One Reporting

(Instr. 4)

BEVERLY, MA 01915

(City) (State) (Zip)

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

1.Title of Security (Instr. 3)

2. Transaction Date 2A. Deemed (Month/Day/Year)

Execution Date, if

(Month/Day/Year)

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5)

5. Amount of Securities Beneficially Owned Following

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial (I) Ownership

(Instr. 4)

(A) or

Reported Transaction(s) (Instr. 3 and 4)

Code V Amount (D) Price

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

any

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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 Conversion Security or Exercise

3. Transaction Date 3A. Deemed (Month/Day/Year)

4. Execution Date, if

5. Number of TransactionDerivative Securities Code Acquired (A) or

6. Date Exercisable and **Expiration Date** (Month/Day/Year)

7. Title and Amou Underlying Secur (Instr. 3 and 4)

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(Instr. 3)	Price of Derivative		(Month/Day/Year)	(Instr. 8)	Disposed of (D) (Instr. 3, 4, and 5)					
	Security			Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Am Nur Sha
Options	\$ 0.11	10/01/2015		A	452,381		<u>(1)</u>	10/01/2025	Common Stock, \$0.001 par value	45
Options	\$ 0.5	10/01/2015		A	297,619		(2)	10/01/2025	Common Stock, \$0.001 par value	29
Options	\$ 0.5	03/31/2016		D		297,619	(3)	10/01/2025	Common Stock, \$0.001 par value	29
Options	\$ 0.06	03/31/2016		A	297,619		(3)	10/01/2025	Common Stock, \$0.001 par value	29
Options	\$ 0.04	06/16/2016		A	700,000		<u>(4)</u>	06/15/2026	Common Stock, \$0.001 par value	70

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Richardson Kevin A II						

100 CUMMINGS CENTER, SUITE 332D BEVERLY, MA 01915

X

Signatures

/s/ Kevin A.
Richardson, II 09/30/2016

**Signature of Reporting
Person

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Date

- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) This option for 452,381 shares fully vested on October 1, 2015.
- (2) This option for 297,619 shares fully vested on October 1, 2015.

Reporting Owners 2

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- (3) This option for 297,619shares had an adjustment to the exercise price from \$0.50 to \$0.06 per section 4 of the stock option agreement and SEC Registration File No. 333-208676.
- (4) This option for 700,000 shares fully vested on June 16, 2016.

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.