## Edgar Filing: ENDOLOGIX INC /DE/ - Form 4

ENDOLOGIX	X INC /DE/									
Form 4										
May 27, 2014	ŀ									
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									PPROVAL	
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287		
Check this boxif no longersubject toSection 16.Form 4 orForm 5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934						January 31         Expires:       200!         Estimated average         burden hours per         response       0.!				
obligation may contin <i>See</i> Instruct 1(b).	s Section 17(a)	) of the Public Ut 30(h) of the Inv	ility Hold	ing Com	pany	Act o	f 1935 or Sectio	n		
(Print or Type R	esponses)									
NEELS GUIDO J Symbol			Name and Ticker or Trading OGIX INC /DE/ [ELGX]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) 7916 DEAN	(Month/Da	3. Date of Earliest Transaction (Month/Day/Year) 05/22/2014					XDirector10% Owner Officer (give titleOther (specify below)below)			
			If Amendment, Date Original led(Month/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ul>			
INDIANAPO	DLIS, IN 46240						Form filed by M Person	More than One Re	eporting	
(City)	(State) (Z	Zip) Table	e I - Non-De	erivative S	ecuri	ties Ac	quired, Disposed of	f, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactio Code (Instr. 8)	4. Security onAcquired Disposed (Instr. 3,	(A) o of (D	)	Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	05/22/2014	05/22/2014	Code V A	Amount 7,593	(D) A	Price \$ 0	(Instr. 3 and 4) 31,750	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.

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

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

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1. Title of Derivative Security (Instr. 3)	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	onNumber Exp of (Mo				Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
		Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>		Relations				
I. O. I.	Director	10% Owner	Officer	Other		
NEELS GUIDO J 7916 DEAN ROAD INDIANAPOLIS, IN 46240	Х					
Signatures						
Guido J. Neels by Shelley B. T Person.	hunen, A	ttorney-in-Fa	act for R	eporting	05/23/2014	
<u>**Signature of Reporting Person</u> Date						

Deletionshin

\*\*Signature of Reporting Person

## **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.