## Edgar Filing: Ryan Louis E - Form 4

Ryan Louis l	Е										
Form 4	5 2011										
September 1	Л								OMB AF	PROVAL	
				RITIES AND EXCHANGE COMMISSION shington, D.C. 20549				OMMISSION	OMB Number:	3235-0287	
Check th if no long	ger STATI	STATEMENT OF CHANGES IN BENEFICIAL OWN						JERSHIP OF	Expires:	January 31, 2005	
Section 16.				SECURITIES					Estimated average burden hours per		
Form 5	Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,								response	0.5	
obligations may continue.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 I	Responses)										
Deserve Lessie E			2. Issuer Name <b>and</b> Ticker or Trading ymbol dgeWave, Inc. [EWVE]				5. Relationship of Reporting Person(s) to Issuer				
•							(Check all applicable)				
(Last)	(First)	(Middle)	3. Date of Earliest Transaction				X Director				
15333 AVENUE OF 09				(Month/Day/Year) 09/14/2011				_X_ Director _X_ 10% Owner _X_ Officer (give title Other (specify below) below)			
SCIENCE, SUITE 100								Chief Executive Officer			
				mendment, Date Original			6. Individual or Joint/Group Filing(Check				
			Ionth/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person				
SAN DIEGO,, CA 92128 Form filed by More than One Reporting Person											
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative Se	ecuriti	es Acqu	uired, Disposed of,	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	ity (Month/Day/Year) Execution Date, if			3.4. Securities AcquiredTransactior(A) or Disposed of (D)Code(Instr. 3, 4 and 5)(Instr. 8)			Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)	()		
Common Stock	09/14/2011			A <u>(1)</u>	200,000	А	\$ 0.01	2,544,781	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)

## Edgar Filing: Ryan Louis E - Form 4

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. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Securi (Instr.	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	5	Relationships							
	Director	10% Owner	Officer	Other					
Ryan Louis E 15333 AVENUE OF SCIENCI SUITE 100 SAN DIEGO,, CA 92128	E X	Х	Chief Executive Officer						
Signatures									
/s/ Louis E. 09 Ryan	0/15/2011								
**Signature of	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) Granted pursuant to the 2010 Employee, Director and Consultant Equity Incentive Plan and with no Company Lapsing Forfeiture Right (as such term is defined in the 2010 Plan i.e. fully vested) once granted.

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.

Reporting Person