

WEIL JOHN D
Form 4
September 16, 2011

FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type Responses)

1. Name and Address of Reporting Person *
WEIL JOHN D

2. Issuer Name and Ticker or Trading Symbol
ALLIED HEALTHCARE PRODUCTS INC [AHPI]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)
200 N BROADWAY SUITE 825
(Street)

3. Date of Earliest Transaction (Month/Day/Year)
09/15/2011

Director 10% Owner
 Officer (give title below) Other (specify below)

ST LOUIS, MO 63102

(City) (State) (Zip)

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)
 Form filed by One Reporting Person
 Form filed by More than One Reporting Person

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

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of 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)
				(A) or (D)	Price		
Common Stock	09/15/2011		P	2,500	A \$ 3.784	3,123,857	I Limited Partnership <u>(2)</u>
Common Stock						4,000	I IRA <u>(1)</u>
Common Stock						10,000	I Son <u>(1)</u>
Common Stock						26,300	I Spouse <u>(1)</u>
Common Stock						10,500	D

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

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(9-02)

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. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Amount or Number of Shares
Option (right to buy)	\$ 4.34					11/11/2011 ⁽³⁾ 11/10/2020	Common Stock	1,500
Option (right to buy)	\$ 5.04					11/13/2010 ⁽³⁾ 11/12/2019	Common Stock	1,500
Option (right to buy)	\$ 4.05					11/13/2009 ⁽³⁾ 11/12/2018	Common Stock	1,500
Option (right to buy)	\$ 6.73					11/08/2008 ⁽³⁾ 11/07/2017	Common Stock	1,500
Option (right to buy)	\$ 5.24					11/16/2007 ⁽³⁾ 11/15/2016	Common Stock	1,500
Option (right to buy)	\$ 5.63					12/14/2006 ⁽³⁾ 12/13/2015	Common Stock	1,000
Option (right to buy)	\$ 6.841					11/12/2005 ⁽³⁾ 11/11/2014	Common Stock	1,000
Option (right to buy)	\$ 3.9					11/14/2004 ⁽³⁾ 11/13/2013	Common Stock	1,000

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
WEIL JOHN D 200 N BROADWAY SUITE 825 ST LOUIS, MO 63102	X	X		

Signatures

John D. Weil 09/16/2011

__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) Filer disclaims any economic benefit in shares.
- (2) Owned by a family limited partnership of which Clayton Management Company (wholly owned by the Reporting Person) acts as General Partner
- (3) Options may not be exercised for a period of one year from the date of the grant and thereafter are exercisable in full.

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.