

HERREGRAVEN MARC
Form 4
June 09, 2009

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 *
HERREGRAVEN MARC

(Last) (First) (Middle)
5420 FELTL RD
(Street)

MINNETONKA, MN 55343

(City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol
UROPLASTY INC [UPI]

3. Date of Earliest Transaction (Month/Day/Year)
06/05/2009

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

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

____ Director _____ 10% Owner
 Officer (give title below) _____ Other (specify below)
VP Manufacturing

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 Ownership (Instr. 4)
common stock				(A) or (D) Price	8,100	D	

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

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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)	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)	Amount or Number of Shares	
				Code	V (A) (D)	Date Exercisable	Expiration Date	Title	
stock options	\$ 3.15					06/24/2008	06/23/2013	Common Stock	6,667
stock options	\$ 3.15					06/24/2009	06/23/2013	Common Stock	6,667
stock options	\$ 3.15					06/24/2010	06/23/2013	Common Stock	6,666
stock options	\$ 5.3					12/21/2005	12/21/2009	Common Stock	50,000
stock options	\$ 2.85					02/02/2008	02/02/2011	Common Stock	20,000
stock options	\$ 2.65					02/02/2009	02/01/2014	Common Stock	3,334
stock options	\$ 2.65					02/02/2010	02/01/2014	Common Stock	1,666
stock options	\$ 4.31					07/03/2008	07/02/2012	Common Stock	13,334
stock options	\$ 4.31					07/03/2009	07/02/2012	Common Stock	6,666
stock options	\$ 0.85	06/05/2009		A	10,000	06/05/2009	06/04/2014	Common Stock	10,000
stock options	\$ 0.85	06/05/2009		A	10,000	06/05/2010	06/04/2014	Common Stock	10,000
stock options	\$ 0.85	06/05/2009		A	10,000	06/05/2011	06/04/2014	Common Stock	10,000

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
HERREGRAVEN MARC 5420 FELTL RD MINNETONKA, MN 55343			VP Manufacturing	

Signatures

Larry Bakeman

06/08/2009

**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) Options that are exercisable within 60 days of June 5, 2009
 - (2) Price is not applicable as this is an award with the right to exercise after completing the requisite service period.

Remarks:

Signature is on behalf of Mr. Herregraven

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.