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HIGGINS T	HOMAS T										
Form 4											
August 21, 2	012										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB APPROVAL			
	UNITED		Washington			NGE (LOWINISSION	OMB Number:	3235-0287		
Check the if no long	ter							Expires:	January 31,		
subject to		IENT OF CH	F CHANGES IN BENEFICIAL OW				NERSHIP OF	Estimated a	2005 average		
Section 1		SECURITIES						burden hours per			
Form 4 o Form 5		and to Coot:	= 16(a) of the	- Carrit	F			response 0.			
	Form 5 obligations obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section										
may cont	inue.		e Investment	•	· ·			11			
See Instru 1(b).	iction	50(11) 01 01	e mvestment	compan	y 1101	. 01 17	10				
1(0).											
(Print or Type I	Responses)										
1. Name and Address of Reporting Person [*] 2. Issuer Name and Ticker or Trading						ng	5. Relationship of Issuer	Reporting Per	son(s) to		
HIGGINS T	HOMAS I		Symbol				Issuel				
		Net	roMetrix, Inc	e. [NURC)]		(Chec	k all applicable	e)		
(Last)	(First) (N		ate of Earliest Tr	ransaction							
			(Month/Day/Year)				Director 10% Owner X_ Officer (give title Other (specify				
C/O NEUROMETRIX, INC., 62 FOURTH AVENUE			08/21/2012				below) below)				
FOORTHA	VENUE						Senior V	ice President, (CFO		
(Street)			4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
Filed(Month/								pplicable Line) K_ Form filed by One Reporting Person			
WAITHAN	A MA 02451							Jore than One Re			
WALIHAN	I, MA 02451						Person				
(City)	(State)	(Zip)	Table I - Non-I	Derivative	Securi	ities Aco	quired, Disposed of	f, or Beneficial	lly Owned		
1.Title of	2. Transaction Date		3.				5. Amount of	6. Ownership			
Security (Instr. 3)	(Month/Day/Year)		e, if Transacti Code	on(A) or D (D)	ispose	d of	Securities Beneficially	Form: Direct (D) or	Indirect Beneficial		
			Day/Year) (Instr. 8) (Instr. 3, 4 and 5)				Owned	Indirect (I)			
							Following	(Instr. 4)	(Instr. 4)		
					(A)		Reported Transaction(s)				
			Code V	Amount	or	Drigo	(Instr. 3 and 4)				
Common				Amount	(D)	Price \$					
Stock	08/21/2012		Р	5,000	А	φ 0.64	46,304	D			
Stook						0.01					

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)

1. Title of Derivative Security (Instr. 3)	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transact Code (Instr. 8)	of (Month/D			Amou Unde Secur	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		

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Reporting Owners

Reporting Owner Name / Addr	ess	Relationships							
1	Director	10% Owner	Officer	Other					
HIGGINS THOMAS T C/O NEUROMETRIX, INC 62 FOURTH AVENUE WALTHAM, MA 02451	2.		Senior Vice President, CFO						
Signatures									
/s/ Thomas T. Higgins	08/21/2012								
<u>**</u> 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).

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.