IGI LABORATORIES, INC

Form 4

August 29, 2014

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

3235-0287

Expires:

January 31, 2005

0.5

Estimated average burden hours per

OMB APPROVAL

response...

if no longer subject to Section 16. Form 4 or Form 5 obligations

may continue.

See Instruction

Check this box

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * LIFE SCIENCES OPPORTUNITIES **FUND II LP**

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to

Issuer

(Last)

(City)

(Middle)

(Zip)

IGI LABORATORIES, INC [IG]

(Check all applicable)

CARNEGIE HALL TOWER, 152

(State)

(First)

3. Date of Earliest Transaction

(Month/Day/Year) 08/27/2014

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

WEST 57TH STREET, 19TH **FLOOR**

> (Street) 4. If Amendment, Date Original

> > Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check

Applicable Line)

Form filed by One Reporting Person _X_ Form filed by More than One Reporting

Person

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

NEW YORK, NY 10019

					,		,	-5
2. Transaction Date	2A. Deemed	3.	4. Securities	Acquii	red (A)	5. Amount of	6.	7. Nature of
(Month/Day/Year)	Execution Date, if	Transactio	omr Disposed o	of (D)		Securities	Ownership	Indirect
	any	Code	(Instr. 3, 4 an	d 5)		Beneficially	Form:	Beneficial
	(Month/Day/Year)	(Instr. 8)				Owned	Direct (D)	Ownership
	• •	,				Following	or Indirect	(Instr. 4)
						Reported	(I)	· · · · · ·
				(A)		Transaction(s)		
				or		` '	,	
		Code V	Amount	(D)	Price	()		
00/27/2014		C	155 057	Ъ	\$	2 102 052	D (1)	
08/2//2014		3	455,257	D	6.2	2,102,053	$D_{\underline{(1)}}$	
					٠. ـ			
00/27/2014		C	2544742	Ъ	\$	11 740 000	D (2)	
08/2//2014		2	2,544,743	D	6.2	11,749,808	$D^{(2)}$	
		any (Month/Day/Year) 08/27/2014	2. Transaction Date (Month/Day/Year) Execution Date, if any (Month/Day/Year) (Month/Day/Year) Code (Instr. 8) Code V 08/27/2014 S	2. Transaction Date (Month/Day/Year) Execution Date, if any (Month/Day/Year) (Month/Day/Year) Code (Instr. 3, 4 and (Instr. 8)) Code V Amount S 455,257	2. Transaction Date (Month/Day/Year) Execution Date, if any (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Instr. 8) 2. Transaction Date (A) (Instr. 3, 4 and 5) (Instr. 8) (A) or (Code V Amount (D)) 08/27/2014 S 455,257 D	2. Transaction Date (Month/Day/Year) 2. Transaction Date (Month/Day/Year) Execution Date, if any (Month/Day/Year) (Month/Day/Year) 2. Transactiom Disposed of (D) Code (Instr. 3, 4 and 5) Code V Amount (A) or Code V Amount (D) Price \$ 455,257 D \$ 6.2	2. Transaction Date (Month/Day/Year) 2. Transaction Date (Month/Day/Year) 2. Transaction Date (Month/Day/Year) 2. Transaction Date (Execution Date, if any (Month/Day/Year) 2. Transaction Date (Instr. 3, 4 securities Acquired (A) (Instr. 3, 4 and 5) 2. Transaction Date (A) (Instr. 3, 4 and 5) 2. Transaction Date (A) (Instr. 3, 4 and 5) 2. Transaction Date (Instr. 3, 4 and 5) 3.	(Month/Day/Year) Execution Date, if any (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) Execution Date, if any (Code (Instr. 3, 4 and 5)) (Instr. 8) Code (Instr. 3, 4 and 5) (A) Or (Code V Amount (D) Price) Securities Beneficially Form: Owned Direct (D) Following or Indirect Reported (I) Transaction(s) (Instr. 3 and 4) (Instr. 3 and 4) Securities Ownership Beneficially Form: Owned Direct (D) Following or Indirect Reported (I) Transaction(s) (Instr. 3 and 4) Securities Ownership Beneficially Form: Owned Direct (D) Following or Indirect Reported (I) Transaction(s) (Instr. 3 and 4)

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

Edgar Filing: IGI LABORATORIES, INC - Form 4

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. Transacti Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		ate	7. Title Amour Underl Securit (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr
				Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address		Relationships				
F **********************************	Director	10% Owner	Officer	Other		
LIFE SCIENCES OPPORTUNITIES FUND II LP CARNEGIE HALL TOWER 152 WEST 57TH STREET, 19TH FLOOR NEW YORK, NY 10019		X				
LIFE SCIENCES OPPORTUNITIES FUND INSTITTUTIONAL II LP CARNEGIE HALL TOWERS 152 WEST 57TH STREET, 19TH FLOOR NEW YORK, NY 10019		X				
GALE JAMES C 152 WEST 57TH STREET, 19TH FLOOR NEW YORK, NY 10022	X					
LOF PARTNERS LLC 126 EAST 56TH STREET, 24TH FLOOR NEW YORK, NY 10022				See Remarks		
SANDERS DON A 600 TRAVIS, SUITE 5800 HOUSTON, TX 77002				See Remarks		
MORRIS BENJAMIN T 600 TRAVIS, SUITE 5800 HOUSTON, TX 77002				See Remarks		
Signatures						
Life Sciences Opportunities Fund II, L.P., By: Signet Healthcare Partner James C. Gale, Manager	s, LLC, E	By: /s/		08/28/2014		

Reporting Owners 2

Edgar Filing: IGI LABORATORIES, INC - Form 4

* -	Signature of Reporting Person	Date	
Life Sciences Opportunities Fund (Institutional) II, L.P., By. Signet Healthcare Partners, LLC, By: /s/ James C. Gale, Manager			
* -	Signature of Reporting Person	Date	
Signet Healthcare Partners, LLC, By: /s/ James C. Gale, Manager			
*	Signature of Reporting Person	Date	
SMW Investments I, LLC, By: Ben T. Morris, Managing Member			
*	Signature of Reporting Person	Date	
James C. Gale		08/28/2014	
* -	Signature of Reporting Person	Date	
Don A. Sanders		08/28/2014	
* -	Signature of Reporting Person	Date	
Ben T. Morris		08/28/2014	
*	Signature of Reporting Person	Date	
Donald V. Weir		08/28/2014	
*	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).

These securities are owned directly by Life Sciences Opportunities Fund II, L.P. and indirectly by Signet Healthcare Partners, LLC ("General Partner"), the general partner of Life Sciences Opportunities Fund II, L.P., James C. Gale, the chief investment officer, a manager, and a member of the General Partner, SMW Investments I, LLC ("SMW"), the controlling member of the General Partner, and Don A. Sanders, Ben T. Morris, and Donald V. Weir, the managing members of SMW. The General Partner, Mr. Gale, SMW, Mr. Sanders, Mr. Morris, and Mr. Weir disclaim beneficial ownership of the reported securities except to the extent of their pecuniary interest therein, if any.

These securities are owned directly by Life Sciences Opportunities Fund (Institutional) II, L.P. and indirectly by the General Partner, Mr. Gale, the chief investment officer, a manager, and a member of the General Partner, SMW, the controlling member of the General

(2) Partner, and Mr. Sanders, Mr. Morris, and Mr. Weir, the managing members of SMW. The General Partner, Mr. Gale, SMW, Mr. Sanders, Mr. Morris, and Mr. Weir disclaim beneficial ownership of the reported securities except to the extent of their pecuniary interest therein, if any.

Remarks:

This is a joint filing by Life Sciences Opportunities Fund (Institutional) II, L.P., Life Sciences Opportunities Fund II, L.P., the 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.

Signatures 3