Edgar Filing: DIGITAL ALLY INC - Form 4

DIGITAL AL	LY INC											
Form 4												
June 11, 2015												
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									OMB APPROVAL			
								OMB Number:	3235-0287			
Check this if no longe							Expires:	January 31,				
subject to	STATE	EMENT O	F CHAN			CIA	LOW	NERSHIP OF	Estimated a	2005 average		
Section 16. SECURITIES								burden hours per				
Form 4 or									response	•		
Form 5 obligations	· ·						-	ge Act of 1934,				
may contir				•	•			f 1935 or Sectio	n			
See Instruc		30(h)	of the Inv	vestment (Company	y Act	of 19	40				
1(b).												
(Print or Type Re	esponses)											
1. Name and Ad	dress of Reportin	ng Person *	2 Issuer	Nome and '	Ticker or T	Fradin	a	5. Relationship of	f Reporting Per	son(s) to		
Hutchins Dar			Symbol	r Name and Ticker or Trading				Issuer				
Sym				LALLY	INC IDC	H.YI						
			DIGITAL ALLY INC [DGLY]					(Check all applicable)				
				3. Date of Earliest Transaction				X Director	100	Owner		
				(Month/Day/Year) 06/09/2015				Officer (give		er (specify		
	D, SUITE 31	0	00/09/20	115				below)	below)			
DOOLLYIN		0	4 If Amor	dmant Dat	a Original			6 Individual on L	aint/Crown Filis	a c (Ch 1-		
				4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check				
Filed				(II/Day/Tear)				Applicable Line) _X_ Form filed by One Reporting Person				
OVERLAND	PARK, KS 6	66210						Form filed by M				
0,1111111								Person				
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficial	lly Owned		
1.Title of	2. Transaction I	Date 2A. Dee	execution Date, if TransactionAcquired (A) or					5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Ye							Securities	Form: Direct	Indirect		
(Instr. 3)		any (Month)						Beneficially Owned		Beneficial Ownership		
		(WORLD	Day Tear)	(Instr. 0)	(1130. 5,	- and	5)	Following	(Instr. 4)	(Instr. 4)		
						(1)		Reported	× ,	````		
						(A) or		Transaction(s)				
				Code V	Amount	(D)	Price	(Instr. 3 and 4)				
Common stock	06/09/2015			М	4,000 (1)	А	\$ 0 (1)	23,950	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)

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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. Transactio Code (Instr. 8)	5. 6. Date Exe onNumber Expiration I of (Month/Day Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	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		Relationships							
		Director	10% Owner	Officer	Other				
Hutchins Daniel F 11900 COLLEGE BOULE SUITE 310 OVERLAND PARK, KS 6		Х							
Signatures									
Daniel F. Hutchins	06/11/2	2015							
<u>**</u> Signature of	Date	;							

<u>**</u>Signature of Reporting Person

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).
- On June 9, 2015 the Reporting Person was granted 4,000 restricted shares of common stock under the Digital Ally, Inc. 2015 Stock
- (1) Option and Restricted Stock Plan. Such restricted shares vest on May 1, 2016 provided that the Reporting Person is still serving as a Director at that point in time.

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.