

# ANGIODYNAMICS INC Reported by LICITRA KAREN A

## FORM 4

(Statement of Changes in Beneficial Ownership)

## Filed 07/18/25 for the Period Ending 07/16/25

Address	14 PLAZA DRIVE
	LATHAM, NY, 12110
Telephone	5187981215
CIK	0001275187
Symbol	ANGO
SIC Code	3841 - Surgical and Medical Instruments and Apparatus
Industry	Medical Equipment, Supplies & Distribution
Sector	Healthcare
Fiscal Year	05/31

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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).

☐ Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

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

### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person -	2. Issuer Name and Ticker or Trading Symbol	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
Licitra Karen A	ANGIODYNAMICS INC [ ANGO ]					
(Last) (First) (Middle)	3. Date of Earliest Transaction (MM/DD/YYYY)	X_ Director 10% Owner Officer (give title below) Other (specify below)				
14 PLAZA DRIVE	7/16/2025					
(Street)	4. If Amendment, Date Original Filed (MM/DD/YYYY)	6. Individual or Joint/Group Filing (Check Applicable Line)				
LATHAM, NY 12110		X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City) (State) (Zip)		Form filed by More than One Reporting Person				

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

				1	· · · · · · · · · · · · · · · · · · ·	,		· · · · J · · · · ·		
1.Title of Security	2. Trans. Date	2A. Deemed	ed 3. Trans. Code		4. Securities Acquired (A)		d (A)	5. Amount of Securities Beneficially Owned	6.	7. Nature
(Instr. 3)		Execution	(Instr. 8)		or Disposed of (D)			Following Reported Transaction(s)	Ownership	of Indirect
		Date, if any			(Instr. 3, 4 and 5)			(Instr. 3 and 4)	Form:	Beneficial
										Ownership
									or Indirect	(Instr. 4)
						(A) or			(I) (Instr.	
			Code	V	Amount	(D)	Price		4)	
Common Stock	7/16/2025		Α		17,675 (1)	Α	\$0	90,435	D	
	•	•	•	•		-		•		

#### Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

								0.1	-														
1. Title of Derivate	2.	3. Trans.	3A. Deemed	4. Trans. C	Code	5. Number	of	6. Date Exer	rcisable	7. Titl	le and Amount of	8. Price of	9. Number of	10.	11. Nature								
Security	Conversion	Date	Execution	(Instr. 8)		Derivative	Securities	and Expirati	ion Date	Secur	ities Underlying	Derivative	derivative	Ownership	of Indirect								
(Instr. 3)	or Exercise		Date, if any			Acquired (A	A) or	-		Deriv	ative Security	Security	Securities	Form of	Beneficial								
l' '	Price of					Disposed o	f (D)			(Instr.	. 3 and 4)	(Instr. 5)	Beneficially	Derivative	Ownership								
	Derivative					(Instr. 3, 4	and 5)			-			Owned	Security:	(Instr. 4)								
	Security					-							Following	Direct (D)									
	-							-					Reported	or Indirect									
								1		Date Expiration	Date Expiration		Date Expiration		Date Expiration	Expiration	Expiration	Title	Amount or Number of		Transaction(s)	(I) (Instr.	
				Code	V	(A)	(D)	Exercisable	Date		Shares		(Instr. 4)	4)									

#### **Explanation of Responses:**

(1) The acquisition of 17,675 shares of common stock of AngioDynamics, Inc. ("AngioDynamics") represents 17,675 restricted stock units granted as regular annual compensation for service as a director of AngioDynamics. The restricted stock units immediately vested at the time of grant.

#### **Remarks:**

Exhibit 24.1 - Power of Attorney

#### **Reporting Owners**

Reporting Owner Name / Address	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Licitra Karen A						
14 PLAZA DRIVE	Χ					
LATHAM, NY 12110						

#### Signatures

/s/ Lawrence T. Weiss, Attorney in Fact	7/18/2025

Signature of Reporting Person

Date

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

- \* 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.

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.

#### SUBSTITUTE POWER OF ATTORNEY

Pursuant to the terms of certain Powers of Attorney (the "Powers of Attorney"), the undersigned, Stephen A. Trowbridge, was appointed a true and lawful attorney-in-fact, with full power of substitution, to do and perform every act and thing whatsoever requisite, necessary or proper to be done in the exercise of the rights and powers granted in such Powers of Attorney, by certain officers and directors of AngioDynamics, Inc. (the "Company"), including Karen A. Licitra (the "PoA Party").

Additionally, the Powers of Attorney ratified and confirmed all that such attorney-in-fact, or such attorney-in-fact's substitute or substitutes, lawfully do or cause to be done by virtue of the Powers of Attorney and the rights and powers granted therein.

In accordance with the authority granted under the Powers of Attorney, including the power of substitution, the undersigned hereby appoints Lawrence T. Weiss as a substitute attorney-in-fact, on behalf of the PoA Party, to exercise and execute all of the powers granted or conferred in the applicable Power of Attorney. By his signature as an attorney-in-fact to this Substitute Power of Attorney, Lawrence T. Weiss accepts such appointment and agrees to assume from the undersigned any and all duties and responsibilities attendant to his capacity as an attorney-in-fact. This Substitute Power of Attorney supersedes any and all prior Substitute Powers of Attorney. This Substitute Power of Attorney supersedes any and all prior Substitute Powers of Attorney. This Substitute Power of Attorney shall remain in full force and effect until the earlier of (i) such time as this Substitute Power of Attorney is revoked by the undersigned, Stephen A. Trowbridge, or by the PoA Party, (ii) such time as this Substitute Power of Attorney regarding the purposes outlined herein dated as of a later date, or (iii) such time as the PoA Party is no longer required to file Forms 3, 4, and 5 with respect to such PoA Party's holdings of and transactions in securities issued by the Company.

[Signature Page Follows]

IN WITNESS WHEREOF, the undersigned has executed this Substitute Power of Attorney this 20th day of January, 2025.

/s/ Stephen A. Trowbridge

Stephen A. Trowbridge Attorney-in-Fact

/s/ Lawrence T. Weiss

Lawrence T. Weiss

I accept this appointment and substitution:

By: