

STAAR SURGICAL CO
Form 3
July 01, 2016

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

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INITIAL STATEMENT OF 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 *		2. Date of Event Requiring Statement	3. Issuer Name and Ticker or Trading Symbol	
Â Holliday Keith		(Month/Day/Year)	STAAR SURGICAL CO [STAA]	
(Last)	(First)	(Middle)	4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
1911 WALKER AVENUE			(Check all applicable)	
(Street)			<input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other (give title below) (specify below) V.P., Research & Development	
MONROVIA,Â CAÂ 91016			6. Individual or Joint/Group Filing(Check Applicable Line)	
(City)	(State)	(Zip)	<input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person	

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	35,041 ⁽¹⁾	D	Â

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

SEC 1473 (7-02)

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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of	

				Shares		(I) (Instr. 5)	
Common Stock Options	02/11/2016 ⁽²⁾	08/18/2025	Common Stock	25,000	\$ 7.2	D	Â
Common Stock Options	03/18/2017 ⁽³⁾	03/17/2026	Common Stock	25,000	\$ 7.52	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Holliday Keith 1911 WALKER AVENUE MONROVIA, CA 91016	Â	Â	Â V.P., Research & Development	Â

Signatures

/s/ Samuel Gesten as attorney-in-fact for Keith Holliday

07/01/2016

**Signature of Reporting Person

Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, *see* Instruction 5(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) Includes award of 12,500 Restricted Stock Units of Common Stock (RSU), subject to forfeiture rights, which lapse as to 1/3 of the RSUs on 3/18/17, 1/3 of the RSUs on 3/18/18, and the remaining 1/3 of the RSUs on 3/18/19.
The "new hire" options granted on August 19, 2015 vested and became exercisable effective February 11, 2016, when the level of
- (2) ownership of the Company's outstanding common stock by an investor reached a level that constituted a "Change in Control" under the Company's 2003 Amended and Restated Omnibus Equity Incentive Plan.
- (3) The options granted on March 18, 2016 become exercisable as follows: 1/3 on 3/18/2017 and 2/3 of such options shall become exercisable over the following 24 months in equal amounts on a monthly basis.

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.