Edgar Filing: CLEARSIGN COMBUSTION CORP - Form 4

CLEARSIGN Form 4 October 31, 2	COMBUSTIC	ON CORP									
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION										PPROVAL	
	SECURITIES AND EXCHANGE C Washington, D.C. 20549					COMMISSION	OMB Number:	3235-0287			
Check this if no longe subject to Section 16 Form 4 or	er STATE N	MENT O	GES IN BENEFICIAL OWNERSHIP OF SECURITIES					Expires: January 31 200 Estimated average burden hours per response 0.			
Form 5 obligations may contin <i>See</i> Instruct 1(b).	Section 16(a) of the Securities Exchange Act of 1934, Public Utility Holding Company Act of 1935 or Section of the Investment Company Act of 1940						·				
(Print or Type Ro	esponses)										
Ott Jeffrey L Sy			2. Issuer Name and Ticker or Trading Symbol CLEARSIGN COMBUSTION					5. Relationship of Reporting Person(s) to Issuer			
		CORP [CLIR]					(Check all applicable)				
				e of Earliest Transaction n/Day/Year) /2016				X_Director10% Owner Officer (give titleOther (specify below) below)			
				ndment, Date Original hth/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 			
SEATTLE, V	WA 98168							Form filed by M Form filed by M Person			
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	ecuri	ties Ac	quired, Disposed o	f, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	Security (Month/Day/Year) Execution Date, if		3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or				SecuritiesIBeneficially0OwnedIFollowing0ReportedTransaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
Common				Code V		(D)	Price \$	(Instr. 3 and 4)			
Common Stock	09/30/2016			А	3,676 (1)	А	3.4 (1)	17,310	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)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			Secur	int of 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 / Address		Relationships						
Reporting O when I tume	Director	10% Owner	Officer	Other				
Ott Jeffrey L 12870 INTERURBAN AVE SEATTLE, WA 98168	Х							
Signatures								
/s/ Jeffrey L. Ott	10/31/2016							
<u>**</u> Signature of	Date							

**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 March 9, 2016 the Issuer's board of directors approved annual compensation for the Issuer's independent directors. The reporting person is an independent director. As partial compensation for services provided to the Issuer during 2016, each independent director was

granted 3,676 shares of common stock per quarter, having a per share value of \$3.40, the closing price of the Issuer's common stock on (1) the date of grant. The shares of common stock were issued from the Company's 2011 Equity Incentive Plan and held in escrow until the shares are earned. The shares are earned on a quarterly basis and are released to the independent directors on the last day of each fiscal quarter.

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.