Edgar Filing: INSIGNIA SYSTEMS INC/MN - Form 4

| | YSTEMS INC/ | MN | | | | | | | | | |
|--------------------------------------------------------------------------------|-------------------------------------|--------------------|-------------------------------------------------------------------|-----------------------------------------------|--------------------|--------|--------------------------|--------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|----------|--|
| Form 4 | | | | | | | | | | | |
| December 16 | | | | | | | | | | | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | OMB AI OMB Number: | PROVAL 3235-0287 | | | |
| Check this box | | | | GES IN BENEFICIAL OWNERSHIP SECURITIES | | | | NERSHIP OF | Expires:January 312005Estimated averageburden hours perresponse0.5 | | |
| Form 5 obligatior may conti <i>See</i> Instru 1(b). | Filed pu s Section 17 | (a) of the | Public Ut | | ling Com | ipany | Acto | ge Act of 1934, f 1935 or Sectio 40 | | 0.0 | |
| (Print or Type R | esponses) | | | | | | | | | | |
| Corcoran Edward Augustine Symbol | | | | GNIA SYSTEMS INC/MN | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| | | | 3. Date of Earliest Transaction (Month/Day/Year) 12/12/2013 | | | | | _X_Director10% Owner Officer (give titleOther (specify below)below) | | | |
| | | | | Amendment, Date Original l(Month/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person | | | |
| MINNEAPO | DLIS, MN 5544 | 5 | | | | | | Form filed by M Person | Iore than One Re | eporting | |
| (City) | (State) | (Zip) | Table | e I - Non-D | erivative S | Securi | ties Acc | quired, Disposed of | f, or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Da (Month/Day/Yea | r) Executio any | med on Date, if Day/Year) | Code (Instr. 8) | on(A) or Di (D) | sposed | d of | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | |
| Common Stock | 12/12/2013 | | | А | 5,576 | A | \$ 2.69 | 398,365 | 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. Transact Code (Instr. 8) | 5. ionNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | 5 | Date | Secur | unt of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr |
|-----------------------------------------------------|-----------------------------------------------------------------------|-----------------------------------------|--------------------------------------|--------------------------------------------------------------------------------------------------------------------------|---------------------|--------------------|-------|----------------------------------------|-----------------------------------------------------|-----------------------------------------------------------------------------|
| | | | Code V | 7 (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

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Reporting Owners

| Reporting Owner Name / Addre | ss | Relationships | | | | | | |
|--------------------------------------------------------------------------|------------|---------------|---------|-------|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | |
| Corcoran Edward Augustine 8799 BROOKLYN BLVD MINNEAPOLIS, MN 55445 | Х | | | | | | | |
| Signatures | | | | | | | | |
| /s/ Edward Corcoran | 12/16/2013 | | | | | | | |
| **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).

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.