WEIL JOHN D Form 4 October 02, 2009

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

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Check this box

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

See Instruction 1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * WEIL JOHN D

2. Issuer Name and Ticker or Trading Symbol

Issuer

5. Relationship of Reporting Person(s) to

ALLIED HEALTHCARE PRODUCTS INC [AHPI]

(Check all applicable)

(Last) (First) (Middle)

(Street)

3. Date of Earliest Transaction

4. If Amendment, Date Original

_X__ 10% Owner _X__ Director _ Other (specify Officer (give title below)

(Month/Day/Year) 200 N BROADWAY SUITE 825 10/02/2009

6. Individual or Joint/Group Filing(Check Applicable Line)

Filed(Month/Day/Year)

X Form filed by One Reporting Person _ Form filed by More than One Reporting

Person

ST LOUIS, MO 63102

(City)	(State)	(Zip) Tal	ble I - Non	-Derivative	Secu	ırities Acqu	iired, Disposed o	f, or Benefici	ally Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transacti Code (Instr. 8)	omr Dispos (Instr. 3, 4	ed of	5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock					, ,		4,000	I	IRA
Common Stock							10,000	I	Son (1)
Common Stock							26,300	I	Spouse (1)
Common Stock							10,500	D	
Common Stock	10/02/2009		P	15,000	A	\$ 4.6197	3,127,514	I	Limited Partnership (2)

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

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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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration Date (Month/Day/Year			7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Option (right to buy)	\$ 4.05					11/13/2009(3)	11/12/2018	Common Stock	1,500	
Option (right to buy)	\$ 6.73					11/08/2008(3)	11/07/2017	Common Stock	1,500	
Option (right to buy)	\$ 5.24					11/16/2007(3)	11/15/2016	Common Stock	1,500	
Option (right to buy)	\$ 5.63					12/14/2006(3)	12/13/2015	Common Stock	1,000	
Option (right to buy)	\$ 6.841					11/12/2005(3)	11/11/2014	Common Stock	1,000	
Option (right to buy)	\$ 3.9					11/14/2004(3)	11/13/2013	Common Stock	1,000	

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		

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WEIL JOHN D
200 N BROADWAY SUITE 825 X X
ST LOUIS, MO 63102

Signatures

John D. Weil 10/02/2009

**Signature of 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).
- (1) Filer disclaims any economic benefit in shares.
- Shares are held in Woodbourne Partners L.P. of which the Reporting Person is the sole general partner. Number of shares does not include an aggreate of 1,100 additional shares of common stock held in one individual retirement account maintained for the benefit of certain person holding limited partnership interest in Woodbourne (or for the benefit of associate of such person). The Reporting Person disclaims any ownership or economic interest in the shares held in such IRA account.
- (3) Options may not be exercised for a period of one year from the date of the grant and thereafter are exercisable in full.

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.

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