GYRODYNE CO OF AMERICA INC

Form 4 June 30, 2015

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

2. Issuer Name and Ticker or Trading

OMB Number:

3235-0287

Expires:

5. Relationship of Reporting Person(s) to

Issuer

January 31, 2005

0.5

Estimated average burden hours per

OMB APPROVAL

response...

if no longer subject to Section 16. Form 4 or Form 5 obligations

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

may continue. See Instruction 1(b).

(Print or Type Responses)

LAMB PAUL L

1. Name and Address of Reporting Person *

(Last) (First) (Middle)			Symbol GYRODYNE CO OF AMERICA INC [GYRO]					(Check all applicable)			
			3. Date of Earliest Transaction (Month/Day/Year)					X Director 10% Owner Officer (give title Other (specify below)			
	42 MT. GREY ROAD			06/26/2015				·	30.0.17		
(Street) EAST SETAUKET, NY 11733				4. If Amendment, Date Original Filed(Month/Day/Year)				-	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		
	(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially C						lly Owned	
	1.Title of Security (Instr. 3)	rity (Month/Day/Year) Execution (Month/Day/Year) any			3. 4. Securities Acquired Transactior(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or			iired	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)
	Gyrodyne Company of America Common Stock	06/26/2015			P <u>(1)</u>	9,963.5	A	\$ 2.75	12,450.54	I	By Lamb & Barnosky Profit Sharing Plan, of which Mr. Lamb is Trustee
	Gyrodyne Company of America	06/26/2015			P(1)	52,171.5	A	\$ 2.75	64,094.5	I	By Paul L. Lamb P.C. Defined

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Common Benefit Stock Plan, of which Mr. Lamb is Trustee Gyrodyne Company A \$ 54,561 By Paul L. $P^{(1)}$ 39,183 of America 06/26/2015 Ι Lamb IRA Common

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.

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

3. Transaction Date 3A. Deemed 7. Title and 8. Price of 1. Title of 2. 4. 5. 6. Date Exercisable and Execution Date, if Derivative Conversion (Month/Day/Year) TransactionNumber **Expiration Date** Amount of Derivative Security or Exercise Code (Month/Day/Year) Underlying Security of (Instr. 3) Price of (Month/Day/Year) (Instr. 8) Securities (Instr. 5) Derivative Derivative Securities (Instr. 3 and 4) Security Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) Amount or Expiration Date Title Number Exercisable Date of Code V (A) (D) Shares

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

LAMB PAUL L
42 MT. GREY ROAD X
EAST SETAUKET, NY 11733

Signatures

Stock

P.L. Lamb 06/30/2015

**Signature of Reporting Person Date

Reporting Owners 2

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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 June 26, 2015, the reporting person purchased a total of 101,318 shares of common stock of Gyrodyne Company of America, Inc. (the "Company") for \$2.75 per share in connection with the reporting person's exercise of nontransferable subscription rights to purchase common stock of the Company pursuant to the Company's rights offering.

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.