AtheroNova Inc. Form 4 October 02, 2014

Form 5

1(b).

(Last)

1. Title of

Security

(Instr. 3)

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

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Form 4 or Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction

(Print or Type Responses)

1. Name and Address of Reporting Person * **EUROPA INTERNATIONAL INC**

(First)

2. Transaction Date 2A. Deemed

(Middle)

C/O KNOLL CAPITAL MANAGEMENT, L.P., 5 EAST 44TH STREET, SUITE 12

(Street)

NEW YORK, NY 10017 (State) (Zip) (City)

2. Issuer Name and Ticker or Trading Symbol

AtheroNova Inc. [AHRO]

3. Date of Earliest Transaction

(Month/Day/Year) 09/12/2014

4. If Amendment, Date Original

Filed(Month/Day/Year)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 3. 4. Securities (Month/Day/Year) Execution Date, if TransactionAcquired (A) or

> Code Disposed of (D) (Instr. 8)

(Instr. 3, 4 and 5)

Reported (A) Transaction(s) or (Instr. 3 and 4)

Code V Amount (D) Price

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 Conversion

3. Transaction Date 3A. Deemed

(Month/Day/Year)

(Month/Day/Year) Execution Date, if

TransactionNumber

6. Date Exercisable and Expiration

7. Title and Amount Underlying Securitie

OMB APPROVAL

3235-0287

January 31,

2005

0.5

OMB

Number:

Expires:

response...

5. Relationship of Reporting Person(s) to

6. Individual or Joint/Group Filing(Check

6. Ownership

Form: Direct

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

(I)

(Instr. 4)

(Check all applicable)

10% Owner Other (specify

7. Nature of

Ownership (Instr. 4)

Indirect

SEC 1474

(9-02)

(D) or Indirect Beneficial

Issuer

below)

Director

Applicable Line)

5. Amount of

Securities

Following

Owned

Beneficially

Officer (give title

Estimated average

burden hours per

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8	8)	of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	S		(Instr. 3 and 4)	
				Code	V	(A) (D)	Date Exercisable	Expiration Date	Title	Amour or Number of Shar
8% Senior Secured Convertible Note	\$ 1.11 <u>(1)</u>	09/12/2014		P(1)		1 (1)	09/12/2014(1)	09/12/2015(1)	Common Stock	90,09
Common Stock Purchase Warrant	\$ 2	09/12/2014		P(1)		1 (1)	09/12/2014	09/12/2019	Common Stock	45,04

Reporting Owners

Reporting Owner Name / Address	Relationships							
1	Director	10% Owner	Officer	Other				
EUROPA INTERNATIONAL INC								

EUROPA INTERNATIONAL INC C/O KNOLL CAPITAL MANAGEMENT, L.P. 5 EAST 44TH STREET, SUITE 12 NEW YORK, NY 10017

X

Signatures

/s/ Fred Knoll, Principal, Knoll Capital Management, L.P., Investment
Manager

10/01/2014

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).
- The reporting person purchased the note and warrant for aggregate consideration of \$100,000 from the Registrant. The note is convertible at the sole option of the Registrant. Conversion of the note and exercise of the warrant are subject to a beneficial ownership cap of 4.99%.

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.

Reporting Owners 2