UROPLASTY INC Form 4 May 31, 2007

FORM 4

OMB APPROVAL

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

OMB 3235-0287 Number:

Check this box if no longer subject to Section 16.

January 31, Expires: 2005 Estimated average

Form 4 or Form 5

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

burden hours per response... 0.5

obligations may continue. See Instruction

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

1(b).

(City)

(State)

(Zip)

(Print or Type Responses)

1. Name and Address of Reporting Person * HOLMAN SUSAN HARTJES			2. Issuer Name and Ticker or Trading Symbol UROPLASTY INC [UPI]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)		
(Last)	(First)	(Middle)	3. Date of Earliest Transaction	(Check an applicable)		
5420 FELTL RD		` /	(Month/Day/Year) 05/29/2007	Director 10% Owner State of title Other (specify below) COO		
(Street)			4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check		
MINNETONI	KA, MN 55	343	Filed(Month/Day/Year)	Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		

	(City)	(State)	Table	e I - Non-D	erivative Securit	ties Aco	quired, Disposed o	of, or Beneficial	ly Owned
1.Tit	le of	2. Transaction Date	2A. Deemed	3.	4. Securities Acc	quired	5. Amount of	6. Ownership	7. Nature of
Secu	rity	(Month/Day/Year)	Execution Date, if	Transactio	n(A) or Disposed	of	Securities	Form: Direct	Indirect
(Inst	:. 3)		any	Code	(D)		Beneficially	(D) or	Beneficial
			(Month/Day/Year)	(Instr. 8)	(Instr. 3, 4 and 5	5)	Owned	Indirect (I)	Ownership
							Following	(Instr. 4)	(Instr. 4)
					(4)		Reported		
					(A)		Transaction(s)		
				Code V	Amount (D)	Price	(Instr. 3 and 4)		
com	mon k	05/29/2007		W	15,659 A	<u>(2)</u>	537,008 (1)	D	

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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)

Edgar Filing: UROPLASTY INC - Form 4

Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	(Month/Day/Year)	Execution Date, if any (Month/Day/Year)	Transactic Code (Instr. 8)	onDerivative Securities Acquired (A) o Disposed of (D (Instr. 3, 4, and 5))		Underlying (Instr. 3 and	
				Code V	(A) (D	Date Exercisable	Expiration Date	Title	Amount of Number of Shares
Stock Options	\$ 5.19	05/29/2007	05/29/2007	W	100,000	01/01/2007	01/01/2015	Common Stock	100,000

5. Number of

6. Date Exercisable and

7. Title and Amount of

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
HOLMAN SUSAN HARTJES						
5420 FELTL RD			COO			
MINNETONKA, MN 55343						

3. Transaction Date 3A. Deemed

Signatures

1. Title of 2.

Larry Bakeman 05/30/2007

**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) Includes 322,008 shares and 215,000 shares that Ms. Hartjes Holman may acquire upon the exercise of options that are exercisable within 60 days of May 29, 2007.
- (2) A price is not applicable as the securities were acquired by will and the laws of descent and distribution.
- (3) Includes 215,000 shares that Ms. Hartjes Holman may acquire upon the exercise of options that are exercisable within 60 days of May 29, 2007.

Remarks:

Signature is on behalf of Ms. Hartjes Holman.

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