FORM 4	4
--------	---

Check this box if no
longer subject to
Section 16. Form 4 or
Form 5 obligations
may continue. See
Instruction 1(b).

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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Response	s)												
1. Name and Address o Egan Francis X	2. Issuer Name and Ticker or Trading Symbol AIRGAIN INC [AIRG]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
(Last) C/O AIRGAIN, IN DRIVE, SUITE 15	,	EV CENTRE	3. Date of Earliest T 12/02/2016	ransaction (I	Mont	h/Day/Ye	ar)		other (specify belo	ow)			
SAN DIEGO, CA		4. If Amendment, D	ate 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 Owned									
1. Title of Security		2. Transaction	2A. Deemed	3. Transact	ion	4. Securi	ties Acq	uired	5. Amount of Securities Beneficially	6.	7. Nature		
(Instr. 3)		Date	Execution Date, if	Code		(A) or Disposed of (D)			Owned Following Reported	Ownership	of Indirect		
		(Month/Day/Year)	any	(Instr. 8)		(Instr. 3, 4 and 5)			Transaction(s)	Form:	Beneficial		
			(Month/Day/Year)						(Instr. 3 and 4)	Direct (D)	Ownership		
										or Indirect	(Instr. 4)		
							(A) or			(I)			
				Code	V	Amount	(D)	Price		(Instr. 4)			

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 SEC 1474 (9-02) 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

 (a.g., pute cells warrants entions convertible securities)

(e.g., puts, calls, warrants, options, convertible securities)															
Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code	tion	5. Number n of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Security: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Stock Option (Right to Buy)	\$ 2.6	12/02/2016		J <u>(1)</u>			2,000	(2)	01/18/2021	Common Stock	2,000	\$ 0	2,000	D	
Stock Option (Right to Buy)	\$ 2.3	12/02/2016		J <u>(1)</u>			2,000	(2)	06/12/2023	Common Stock	2,000	\$ 0	2,000	D	
Stock Option (Right to Buy)	\$ 3.1	12/02/2016		J <u>(1)</u>			1,000	(2)	05/12/2024	Common Stock	1,000	\$ 0	1,000	D	
Stock Option (Right to Buy)	\$ 1.6	12/02/2016		J <u>(1)</u>			9,323	(2)	06/11/2025	Common Stock	9,323	\$ 0	9,323	D	
Stock Option (Right to Buy)	\$ 1.9	12/02/2016		J <u>(1)</u>			3,357	(2)	05/24/2026	Common Stock	3,357	\$ 0	3,357	D	

Reporting Owners

Denerting Ormer Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Egan Francis X C/O AIRGAIN, INC. 3611 VALLEY CENTRE DRIVE, SUITE 150 SAN DIEGO, CA 92130	Х						

Signatures

/s/ Francis X. Egan 12

12/05/2016 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) In connection with his resignation as a Managing Director of Northwater Capital Inc., the Reporting Person agreed to assign his interest in the stock options reported herein to Frances Kordyback.

(2) The option is fully vested.

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.