FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APP	ROVAL
	OMB Number:	3235-0287
Ш	Estimated average b	urden

0.5

hours per response:

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

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

					_															
Name and Address of Reporting Person* Consolid Constant A						2. Issuer Name and Ticker or Trading Symbol LUNA INNOVATIONS INC [LUNA]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Graeff Scott A					1	Ectiff in the fill of the fill								X	Direc	ctor	10%	Owner		
,					-										X	Office	er (give title	Oth	er (specify	
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year)								Λ	belov	v) `	belo	w) `		
C/O LUNA INNOVATIONS INCORPORATED					01/	01/14/2019								Chief Executive Officer						
301 1ST STREET, SW, SUITE 200					_									_						
					- 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)														'	X	Eorn	a filed by One	e Reporting Pe	rcon	
ROANO!	KE VA	Λ 2	24011												Λ		,			
																Form Pers		re than One R	eporting	
(City)	(St	ate) (Zip)													1 010	OII			
		Tabl	e I - Noi	n-Deriv	ative	Se	curitie	s Acq	լuired,	Dis	posed o	f, or	Bene	eficia	ally (Owne	ed			
1. Title of S	Security (Inst	r. 3)		2. Transa	action	Execution Date,			3.	3. 4. Securities Acquired (A)							ount of	6. Ownership	7. Nature	
	, ,	,		Date (Month/D)))				Transaction Disposed Of (D) (Instr. Code (Instr. 5)			(Instr.	3, 4 ar	ıd			Form: Direct (D) or Indirec	of Indirect Beneficial		
(Month/Da					Jay/ I Ca	(Month/Day/Year)						Own		l Following	(I) (Instr. 4)	Ownership				
								Code	Ī			(A) or Price		Repor		ted action(s)		(Instr. 4)		
										٧	Amount	(D) Pri		Price			3 and 4)			
Common Stock 01/14/2					/2019				A		92,000	(1)	1) A \$		0 578,490		D			
		To	blo II I	Dorivet	ivo C	^~	rition	Λοαιιί	irod D	ione	sed of,	or D	onofi	المنما	· O	unad		<u>, </u>		
		Id									onvertib				y Ov	viieu				
1. Title of 2. 3. Transaction 3A. Deemed 4							1. 5. Number				6. Date Exercisable and 7. Title and					ice of	9. Number o	of 10.	11. Nature	
Derivative	Conversion	Date (Month/Day/Year)	Execution		Transa	Transaction Code (Instr.		n of		Expiration Date			Amount of			ative/	derivative	Ownership	of Indirect	
Security (Instr. 3)	or Exercise Price of		if any (Month/Day/)	ay/Year)	Code (ınstr.	. Derivative (Securities		(Month/Day/Year)			Securities Underlying			Security (Instr. 5)		Securities Beneficially	Form: Direct (D)	Beneficial Ownership	
` ′	Derivative			, , ,			Acquired		Derivative				`	<i>'</i>	Owned	or Indirect				
	Security				(A) or Security (Instr. Disposed and 4)						str. 3			Following Reported	(I) (Instr. 4	'				
							of (D) (Instr. 3, 4					'					Transaction(s) (Instr. 4)	(s)		
					and 5)			1					(IIISII. 4)							
										Ami	ount									
									or											
							Date		Expiration		Nun	nber								
					Code	ν	(A)		Exercisa		Date	Title		res						

Explanation of Responses:

1. Consists of restricted stock units. Each restricted stock unit represents the contingent right to receive one share of common stock of the Issuer. The restricted stock units vest in three equal annual installments from January 10, 2019, subject to the Reporting Person's continued service with the Company as of each vesting date.

Remarks:

<u>/s/ Scott A. Graeff</u> <u>01/16/2019</u>

** Signature of Reporting Person Date

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

- * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.