Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, I | D.C. 20549 |
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

| OMB APPROVAL | | | | | | | | | |
|--------------------------|--|--|--|--|--|--|--|--|--|
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| Estimated average burden | | | | | | | | | |
| hours per response: | | | | | | | | | |

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

| 1. Name and Address of Reporting Person* Nestro Gene | | | | | | 2. Issuer Name and Ticker or Trading Symbol LUNA INNOVATIONS INC [LUNA] | | | | | | | | | eck all app Direc | , | ng Per | rson(s) to Is 10% O Other (| wner | |
|--|--|-------|---|----------|---|--|-----------------|-----------------------------------|-----------------------------|---------------------------------------|--------------------------------|--|---|-------|---|--|--|--|---|--|
| | (Fii | | 3. Date of Earliest Transaction (Month/Day/Year) 05/14/2022 | | | | | | | | | belov | below) below Chief Financial Office | | | Specify | | | | |
| 301 1ST STREET, SW, SUITE 200 (Street) | | | | | 4. If A | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | Line | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| ROANO | KOE VA | . 2 | 4011 | | | l I | | | | | | | i filed by One Reporting Person i filed by More than One Reporting on | | | | | | | |
| (City) | (St | | Zip) | | | | | | | | | | | | | | | | | |
| | | Table | I - No | n-Deriva | tive S | Secu | rities | Acq | juired, | Dis | posed of | , or I | Bene | ficia | lly Own | ed | | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day | | | | | Execution (Year) | | ution [| ıtion Date, | | Transaction Disposed (Code (Instr. 5) | | es Acquired (A Of (D) (Instr. 3, | | | Securi Benefi Owned | Amount of curities neficially ned Following ported | | wnership n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | Code V | | Amount | (A (D | () or () | Price | Transa | Transaction(s) (Instr. 3 and 4) | | | (III3ti. 4) | |
| Common Stock 05/14/2 | | | | | 2022 | | | Α | | 100,000 | 1) | A | \$ <mark>0</mark> | 17 | 178,134 | | D | | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | erivative Conversion Date Execution Date, or Exercise (Month/Day/Year) if any | | | | 4. Transaction Code (Instr. 8) | | of | ired r osed) r. 3, 4 | Expiration D (Month/Day/ | | ite | 7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4) | | str. | 3. Price of Derivative Security Instr. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | Ownersh Form: Direct (D) or Indirect (I) (Instr. | Ownership | Beneficial Ownership t (Instr. 4) | |
| | | | Code | v | (A) | (D) | Date Exercis | able | Expiration Date | Title | Amo or Num of Shar | ber | | | | | | | | |

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 one installment on May 14, 2025, subject to the Reporting Person's continued service with the Company through such vesting date.

Remarks:

/s/ Scott A. Graeff, Attorney-

In-Fact

** Signature of Reporting Person Date

05/17/2022

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.