

# FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

### OMB APPROVAL

OMB Number: 3235-0104  
 Estimated average burden hours per response... 0.5

### INITIAL STATEMENT OF 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 Responses)

1. Name and Address of Reporting Person * Smith Trent N.		2. Date of Event Requiring Statement (Month/Day/Year) 08/11/2016	3. Issuer Name and Ticker or Trading Symbol InfuSystem Holdings, Inc [INFU]	
(Last) 31700 RESEARCH PARK DRIVE	(First) (Middle) MADISON HEIGHTS, MI 48071		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer (give title below) <input type="checkbox"/> Other (specify below) Exec VP, CAO & Corp Controller	5. If Amendment, Date Original Filed (Month/Day/Year)
(Street)	(City) (State) (Zip)	6. Individual or Joint/Group Filing (Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person		

#### Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
---------------------------------	-------------------------------------------------------	----------------------------------------------------------	-------------------------------------------------------

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

SEC 1473 (7-02)

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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			
Stock Option (right to buy)	(1)	06/15/2019	Common Stock	10,000	\$ 1.93	D	
Stock Option (right to buy)	(2)	07/14/2024	Common Stock	25,000	\$ 2.69	D	
Stock Option (right to buy)	(3)	03/11/2025	Common Stock	20,000	\$ 2.6	D	
Stock Option (right to buy)	(4)	03/16/2022	Common Stock	20,000	\$ 2.15	D	

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Smith Trent N. 31700 RESEARCH PARK DRIVE MADISON HEIGHTS, MI 48071			Exec VP, CAO & Corp Controller	

# Signatures

/s/Trent N. Smith		05/04/2017
Signature of Reporting Person		Date

## Explanation of Responses:

\* If the form is filed by more than one reporting person, *see* Instruction 5(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) Stock option vests 25% per year on anniversary date starting June 15, 2013.

(2) The option, representing the right to purchase a total of 25,000 shares of InfuSystem Holdings, Inc. common stock, vests in thirty-six monthly installments beginning on August 14, 2014.

(3) The option, representing the right to purchase a total of 20,000 shares of InfuSystem Holdings, Inc common stock, vests in forty-eight monthly installments beginning on April 11, 2015.

(4) Stock option vests over 3 years (33% per year) on each anniversary date.

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.