INSIGNIA SYSTEMS INC/MN Form SD May 27, 2016

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

FORM SD

Specialized Disclosure Report

INSIGNIA SYSTEMS, INC.

(Exact name of registrant as specified in its charter)

Minnesota (State or other jurisdiction of incorporation or organization) 1-13471 (Commission File Number)

41-1656308 (IRS Employer identification No.)

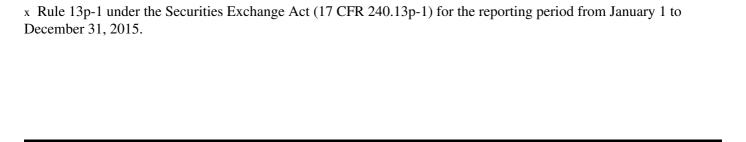
8799 Brooklyn Blvd., Minneapolis, Minnesota (Address of principal executive offices)

55445 (Zip Code)

John Gonsior, CFO 763-392-6200

(Name and telephone number, including area code, of the person to contact in connection with this report.)

Check the appropriate box to indicate the rule pursuant to which this form is being filed, and provide the period to which the information in this form applies:



Section 1 - Conflict Minerals Disclosure	
Item 1.01 Conflict Minerals Disclosure and Report	
Conflict Minerals Disclosure	
This Form SD of Insignia Systems, Inc. (the Company) is filed pursuant to Rule 13p-1 promulgated under the Securities and Exchange Act of 1934, as amended, for the reporting period January 1, 2015 to December 31, 2015.	
A copy of the Company s Conflict Minerals Report is provided as Exhibit 1.01 to this Form SD, and is publicly available at www.insigniasystems.com.	
Item 1.02 Exhibit	
As specified in Section 2, Item 2.01 of this Form SD, the Company is hereby filing its Conflict Minerals Report as Exhibit 1.01 to this report.	
Section 2 Exhibits	
Item 2.01 Exhibits	
The following exhibit is included herewith:	
Exhibit Number Description	
1.01 Conflict Minerals Report as required by Items 1.01 and 1.02 of this Form.	
SIGNATURES	

Pursuant to the requirements of the Securities Exchange Act of 1934, the registrant has duly caused this report to be signed on its behalf by the

duly authorized undersigned.

Insignia Systems, Inc. (Registrant)

Date: May 27, 2016 By /s/ John C. Gonsior John C. Gonsior

John C. Gonsior Vice President, Finance and CFO

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EXHIBIT INDEX

Exhibit Number	Description
1.01	Conflict Minerals Report as required by Items 1.01 and 1.02 of this Form.
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