SEC Form 4	
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### FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

# STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

OMB APPROVAL												
	OMB Number:	3235-0287										
	Estimated average b	urden										

hours per response:	0.5
Estimateu average buruen	

1. Name and Address of Reporting Person* <u>MIDWOOD CAPITAL MANAGEMENT</u> <u>LLC</u>				2. Issuer Name <b>and</b> T <u>MITCHAM IN</u>	ng Symbol <u>ES INC</u> [ MIND ]		tionship of Rep all applicable) Director Officer (give t	X	(s) to Issuer 10% Owner Other (specify			
(Last) (First) (Middle) 265 FRANKLIN STREET			2)	3. Date of Earliest Tra 08/25/2015	below)							
SUITE 903				4. If Amendment, Date of Original Filed (Month/Day/Year)				6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street)							X	Form filed by	One Reporti	ng Person		
BOSTON	MA	02110						Form filed by Person	More than C	ne Reporting		
(City)	(State)	(Zip)										
	-	Table I -	Non-Deriva	tive Securities A	cquired, E	Disposed of, or Benefi	cially	Owned				
1. Title of Security	(Instr. 3)		2. Transaction Date	2A. Deemed Execution Date,	3. Transaction	4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and		Mount of curities	6. Ownershi Form: Direc			

### e of Security (Instr. 3) 2. Transaction Date (Month/Day/Year) 2. Transaction Month/Day/Year) 2. Transaction if any (Month/Day/Year) (Month/Day/Year) 2. Transaction if any (Month/Day/Year) (Month/Day/Year) 2. Transaction if any (Month/Day/Year) 2. Transaction if any (Month/Day/Year) 2. Transaction if any (Month/Day/Year) 2. Transaction (Month/Day/Year) 2. Transaction 2.

		Code	v	Amount	(D)	Price	(Instr. 3 and 4)		
Common Stock	09/04/2015	Р		7,702	A	\$3.9152	1,277,727	Ι	See footnotes <sup>(1)(2)</sup>
Common Stock							3,650	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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr and 5	ative rities ired osed . 3, 4	Expiration Date (Month/Day/Year)		Expiration Date Amount (Month/Day/Year) Securitie Underlyi Derivativ			Expiration Date Am (Month/Day/Year) Sec Un Dei Sec		Expiration Date (Month/Day/Year) eed 3, 4		Expiration Date Amount of (Month/Day/Year) Securities Underlying Derivative Security (Instr. 3		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares										

**Explanation of Responses:** 

1. The Reporting Person disclaims beneficial ownership of the shares of Common Stock reported herein except to the extent of its pecuniary interest therein, and this report shall not be deemed to be an admission that the Reporting Person is the beneficial owner of such shares of Common Stock for purposes of Section 16 or for any other purpose.

2. Represents shares held for the accounts of private investment funds and managed accounts for which the Reporting Person serves as investment adviser.

/s/ Howard B. Rubin, <u>Chief</u> <u>Operating Officer and</u> <u>Managing Member</u>

09/08/2015

\*\* 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.