FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

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*  Murphy Edward G  2. Date of Event Requiring Statement (Month/Day/Year) 06/02/2006 |       |                     |   | 3. Issuer Name and Ticker or Trading Symbol <u>LUNA INNOVATIONS INC</u> [ LUNA ] |   |  |   |   |  |  |
|---|-------|---------------------|---|--|---|--|---|---|--|--|
| (Last) (First) (Mid<br>C/O LUNA INNOVATIONS<br>INCORPORATED   | ddle) |                     |   |  | Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner |  |   | 5. If Amendment, Date of Original Filed (Month/Day/Year)    |  |  |
| 2851 COMMERCE STREET  |       |                     |   |  | Officer (give title below)  | Other (spe                             | , 10.                                       | oplicable Line)   | t/Group Filing (Check  y One Reporting Person    |  |
| (Street) BLACKSBURG VA 24   | 4060  |                     |   |  |   |  |   | Form filed b<br>Reporting P                                 | y More than One<br>erson                         |  |
| (City) (State) (Zip   | D)    |                     |   |  |   |  |   |   |  |  |
| Table I - Non-Derivative Securities Beneficially Owned  |       |                     |   |  |   |  |   |   |  |  |
| 1. Title of Security (Instr. 4)   |       |                     |   | Beneficially Owned (Instr. 4) Form: or India                                     |   | Form: Dire                             | Form: Direct (D) (Instr.<br>or Indirect (I) |   | ature of Indirect Beneficial Ownership<br>tr. 5) |  |
| No securities are beneficially own  | ed    |                     |   |  | 0   | D                                      |   |   |  |  |
| Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)          |       |                     |   |  |   |  |   |   |  |  |
| Title of Derivative Security (Instr. 4)     Expiration Date (Month/Day/Year)  |       | ate                 | 3. Title and Amount of Secur<br>Underlying Derivative Secur |  |   |  | rcise Form:                                 | 6. Nature of Indirect<br>Beneficial Ownership<br>(Instr. 5) |  |  |
|   |       | Date<br>Exercisable | Expiratio<br>Date   | on Titl  | e   | Amount<br>or<br>Number<br>of<br>Shares | Derivative<br>Security                      |   |  |  |

**Explanation of Responses:** 

/s/ Aaron S. Hullman, Esq., Attorney-in-Fact 06/02/2006

\*\* Signature of Reporting Person Da

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

- $^{\star}$  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).

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.