## Edgar Filing: REYNOLDS CRAIG B - Form 4

REYNOLDS	CRAIG B									
Form 4										
January 04, 2	010									
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									PPROVAL	
Washington, D.C. 20549								OMB Number:	3235-0287	
Check this if no long subject to Section 10 Form 4 or Form 5	SECUR	ITIES		VNERSHIP OF ge Act of 1934,	Expires: January 3 20 Estimated average burden hours per response 0					
obligation may conti <i>See</i> Instru 1(b).	s Section 17(a		Utility Hold	ling Com	ipany	Act o	of 1935 or Sectio	n		
(Print or Type R	lesponses)									
REYNOLDS CRAIG B Symbol			er Name <b>and</b> Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer			
	etry Medical Inc. [SMA]				(Check all applicable)					
			of Earliest Transaction Day/Year) 2010				X_ Director10% Owner Officer (give titleOther (specify below) below)			
	nendment, Da onth/Day/Year	-			<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ul>					
WARSAW,	IN 46582						Form filed by M Person			
(City)	(State) (	Zip) Ta	ble I - Non-D	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	Security (Month/Day/Year) Execution Date, if		Code	4. Securi onAcquired Disposed (Instr. 3,	l (A) c l of (E 4 and	))	Securities Beneficially Owned	5. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)			
Common Stock	01/01/2010		А	7,400 (1)	А	\$0	42,200	D		

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

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 Acquired, Disposed of, or Beneficially Owned

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

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	ionNumber Exp of (Mo		Expiration D (Month/Day/ e	Expiration Date A (Month/Day/Year) U S		le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(Instr. 4, and	. 3, 1 5)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
REYNOLDS CRAIG B 3724 N. STATE RD. 15 WARSAW, IN 46582	Х						
Signatures							
David C. Milne, Attorney in Fact	0						
**Signature of Reporting Person		Date					

## **Explanation of Responses:**

- \* 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).
- (1) These shares were granted pursuant to the Company's 2004 Equity Incentive Plan, a plan approved by the Company's shareholders pursuant to Section 16b(3). The shares vest in equal amounts on the first three anniversaries of the date of grant.

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.