## Edgar Filing: NAPOLITANO STEVEN V - Form 4

NAPOLITA Form 4 May 06, 201	NO STEVEN V 1										
FORM	1 /								OMB AF	PROVAL	
				RITIES AND EXCHANGE COMN shington, D.C. 20549				OMMISSION	OMB Number:	3235-0287	
Check this box if no longer STLATED VENTE OF CHAN									Expires:	January 31, 2005	
subject to		MENT OF	F CHAN	GES IN BENEFICIAL OWN				NERSHIP OF	Estimated average		
Section 16.				SECURITIES					burden hours per		
Form 4 o Form 5		report to S	ection 1	6(a) of th	e Securiti	ies Fr	vchange	e Act of 1934,	response	0.5	
obligation	ns Section 17						•	1935 or Section	ı		
may cont <i>See</i> Instru 1(b).	inue.			vestment	•	- ·			-		
(Print or Type I	Responses)										
NAPOLITANO STEVEN V Symbol			er Name <b>and</b> Ticker or Trading MED INC [NOVA]				5. Relationship of Reporting Person(s) to Issuer				
								(Check all applicable)			
(Last)	(First) (	Middle)	3. Date of (Month/E	of Earliest Transaction			X Director	Owner			
C/O DLA PIPER, LLP, 203 N. 05/04/2 LASALLE ST., SUITE 1900			-				Officer (give titleOther (specify below)				
			4. If Ame	endment, Date Original			6. Individual or Joint/Group Filing(Check				
			-				Applicable Line)				
CHICAGO,	IL 60601							_X_ Form filed by O Form filed by M Person			
(City)	(State)	(Zip)	Tabl	e I - Non-I	)erivative S	Securi	ties Aca	uired, Disposed of,	or Beneficial	v Owned	
1.Title of	2 Transaction Dat	- 24 Daam		3.			-	5. Amount of	6.	7. Nature of	
Security (Instr. 3)	2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, i any (Month/Day/Yea			Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)				Securities Beneficially Owned	Ownership Form: Direct (D) or	Indirect Beneficial Ownership	
						(A) or		Following Reported Transaction(s)	Indirect (I) (Instr. 4)	(Instr. 4)	
				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common Stock	05/04/2011			D	57,132 (2)	D	\$ 13.25 (3)	0	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)

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. Transacti Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	(Month/Day/Year) vative urities uired or oosed D) r. 3,		(Instr. 3 and 4)		8. Price Derivat Securit (Instr. 5
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (right to buy)	\$ 8.25					<u>(1)</u>	02/18/2019	Common Stock	6,666	

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## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
NAPOLITANO STEVEN V C/O DLA PIPER, LLP 203 N. LASALLE ST., SUITE 1900 CHICAGO, IL 60601	Х					
Signatures						
/s/ John Lawrence /Attorney in Fact	05/06/2011					

\*\*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).
- Subject to certain restrictions, 2,500 of these options vested 8/18/09 with the remainder vesting approximately 417 per month starting on (1) 9/18/09. This option was canceled in the merger in exchange for a cash payment of \$33,330.00, representing the difference between the exercise price of the option and \$13.25 per share.
- This share total and the other share figures reported on this Form 4 have been adjusted to reflect the Issuer's one-for-three reverse stock (2)split which was effective on June 1, 2010.
- Disposed of pursuant to merger agreement between Issuer and Surgery Center Holdings, Inc. for \$13.25 per share in cash on the effective (3) date of the merger.

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.