Edgar Filing: ORTHOFIX INTERNATIONAL N V - Form 4

ORTHOFIX INTERNATIONAL N V

Form 4

February 03, 2012

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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB

OMB APPROVAL

3235-0287 Number:

January 31, Expires: 2005

Estimated average burden hours per

response... 0.5

if no longer subject to Section 16. Form 4 or

Check this box

Form 5 obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * Mainelli Michael

(First)

2. Issuer Name and Ticker or Trading Symbol

ORTHOFIX INTERNATIONAL N

V [OFIX]

3. Date of Earliest Transaction

02/02/2012

5. Relationship of Reporting Person(s) to

Issuer

(Check all applicable)

(Last)

Common

Stock

(Middle)

(Month/Day/Year)

X_ Director Officer (give title

10% Owner Other (specify

C/O ORTHOFIX

INTERNATIONAL N. V., 3451 PLANO PARKWAY

(Street)

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting

5. Amount of

(Instr. 3 and 4)

1.919

LEWISVILLE, TX 75056

(City) (State) (Zip)

02/02/2012

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1.Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year) Execution Date, if (Instr. 3) (Month/Day/Year)

3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)

Securities Ownership Beneficially Owned (D) or Following Reported (Instr. 4) Transaction(s)

Indirect Form: Direct Beneficial Ownership (Instr. 4) Indirect (I)

7. Nature of

Code V Amount (D)

Price

\$ V 608 (1) A 24.65 (2)

(A)

D

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

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title	and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration D	ate	Amoun	t of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underly	ying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securit	ies	(Instr. 5)	Bene
	Derivative				Securities			(Instr. 3	3 and 4)		Own
	Security				Acquired						Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									A manuat		
									Amount		
						Date	Expiration		Or Number		
					Exercisable	Date		Number			
				C + V	(A) (D)				of		
				Code V	(A) (D)				Shares		

Reporting Owners

Relationships Reporting Owner Name / Address

> 10% Owner Officer Other Director

Mainelli Michael C/O ORTHOFIX INTERNATIONAL N. V. 3451 PLANO PARKWAY LEWISVILLE, TX 75056



Signatures

/s/ Peter Pastorelle, by power of attorney

02/03/2012

**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) Shares acquired under the Company's Stock Purchase Plan on February 2, 2012
- Price per share was set at the end of the Stock Purchase Plan reporting period. This price was based on the value of the Company's **(2)** common stock on the first day of the plan year.

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.

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