## Edgar Filing: PORTMAN ROBERT - Form 4

PORTMAN Form 4	ROBERT										
October 02, 2	2009										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB APPROVAL			
		DSIAIL		hington,			IGE (	201011011551010	OMB Number:	3235-0287	
Check thi if no long				OT A T	<b>O</b> 11		Expires:	January 31, 2005			
subject to Section 1 Form 4 or Form 5	F CHAN	SECUR	Estimated a burden hou response	average rs per							
obligation may conti <i>See</i> Instru 1(b).	inue. Section 1	7(a) of the		ility Hold	ing Com	pany	Act of	e Act of 1934, f 1935 or Sectio 40	n		
(Print or Type R	Responses)										
1. Name and Address of Reporting Person <u>*</u> PORTMAN ROBERT			2. Issuer Name <b>and</b> Ticker or Trading Symbol PACIFICHEALTH LABORATORIES INC [PHLI]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)				3. Date of Earliest Transaction				_X_ Director _X_ 10% Owner			
	ICHEALTH ORIES, INC., N ROAD, SUI'		(Month/D 09/30/20	ay/Year)				Officer (give below)	titleOth below)	er (specify	
			endment, Date Original nth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
MATAWAN	N, NJ 07747								More than One Re		
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	ecurit	ies Acq	uired, Disposed of	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A.2. Transaction Date (Month/Day/Year)2A.		ar) Executio any		3. Transactio Code (Instr. 8)	4. Securities Acquired on(A) or Disposed of (D) (Instr. 3, 4 and 5) (A)		Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common Stock	09/30/2009			А	11,539	А	\$0	2,168,393	D		
Common Stock								200,000	I	By Spouse	

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.

## Edgar Filing: PORTMAN ROBERT - Form 4

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)	4. Transacti Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Inst
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>		Relationships					
	Director	10% Owner	Officer	Other			
PORTMAN ROBERT C/O PACIFICHEALTH LABORATORIES, INC 100 MATAWAN ROAD, SUITE 420 MATAWAN, NJ 07747	C. X	Х					
Signatures							
/s/ Robert 10/02/2009 Portman							

\*\*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).
- Owned by reporting person's spouse, individually and as trustee for their minor children. The reporting person disclaims beneficial (1) ownership of these securities, and the filing of this report is not an admission that the reporting person is the beneficial owner of these securities for purposes of Section 16 or any other purpose.

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.