### Edgar Filing: NOVAMED INC - Form 4

NOVAME Form 4 May 06, 20											
FORM	ЛЛ		SECURITIES AND EXCHANGE COMMISS					OMB APPROVAL			
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Check t if no lot subject Section Form 4 Form 5 obligati may con <i>See</i> Inst 1(b).	nger to 16. or Filed pu ons ntinue.	MENT OF CHA rsuant to Section (a) of the Public	NGES IN SECU 16(a) of t Utility Ho	IN BENEFICIAL OWNERSHIP OF CURITIES Exchange Act of 1934, Holding Company Act of 1935 or Section nent Company Act of 1940			January 31 200 ed average hours per	)5			
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u></u> JESSUP R JUDD			ier Name <b>a</b> i I AMED IN			ling	5. Relationship of Reporting Person(s) to Issuer				
(Last) (First) (Middle)			of Earliest		1		(Check all applicable)				
30962 VIA	(Month 05/04/	/Day/Year) /2011				X_ Director 10% Owner Officer (give title Other (specify below) below)					
COTO DE	(Street) CAZA, CA 9267	Filed(M	nendment, l lonth/Day/Ye	-	al				ng Person		
(City)	(State)	(7:)	ble I - Non	-Derivativ	e Secu	urities A.c.	Person	of or Renefi	icially Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Code (Instr. 3, 4 and 5)				5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
			Code V	Amount	(D)	Price \$	(Instr. 3 and 4)				
Common Stock	05/04/2011		D	31,132 (4)	D		0	D			
Common Stock	05/04/2011		D	35,453	D	\$ 13.25 (5)	0	Ι	See Footnote		
Common Stock	05/04/2011		D	267	D	\$ 13.25 (5)	0	Ι	By Stepdaughter		
Common Stock	05/04/2011		D	266	D	\$ 13.25 (5)	0	I	By Stepson		

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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. Transact Code (Instr. 8)	5. iorNumber of Derivati Securitie Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price Deriva Securit (Instr. :
				Code V	7 (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (right to buy)	\$ 3.45					(2)	11/20/2011	Common Stock	25,000	
Stock Option (right to buy)	\$ 8.25					(3)	02/18/2019	Common Stock	6,666	

## **Reporting Owners**

 Reporting Owner Name / Address
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## **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).

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- (1) Represents shares of common stock which are held by R. Judd Jessup and Charlene Lynne Jessup, as Trustees for the R. Judd Jessup and Charlene Lynne Jessup Living Trust u/a/d May 6, 1991.
- (2) Fully vested as of 11/20/2005. This option was canceled in the merger in exchange for a cash payment of \$245,000.00, representing the difference between the exercise price of the option and \$13.25 per share.

Subject to certain restrictions, 2,500 of these options vested on 8/18/09 with the remainder vesting approximately 417 per month starting
(3) on 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.

- (4) 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 split which was effective on June 1, 2010.
- (5) Disposed of pursuant to merger agreement between Issuer and Surgery Center Holdings, Inc. for \$13.25 per share in cash on the effective 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.