## Edgar Filing: CTI INDUSTRIES CORP - Form 4/A

CTI INDUST	TRIES CORP										
Form 4/A											
May 15, 200	8										
FORM	14									PPROVAL	
	UNITEI	) STATES		ITIES AI hington, 1			NGE (	COMMISSION	OMB Number:	3235-0287	
Check the				0 /					Expires:	January 31,	
if no long subject to	SIATE	MENT O	F CHAN	GES IN BENEFICIAL OWNERS				NERSHIP OF		2005	
	Section 16. SEC						Estimated average burden hours per				
Form 4 o	Form 4 or								response	•	
Form 5	Filed p	ursuant to	Section 16	b(a) of the	Securiti	es Ex	kchang	ge Act of 1934,			
obligation may cont		7(a) of the	Public Ut	ility Hold	ing Com	pany	Act o	of 1935 or Section	n		
See Instru		30(h)	of the Inv	vestment (	Company	y Act	of 19	40			
1(b).											
(Drint or Tuno I	Pasmansas)										
(Print or Type F	(xesponses)										
1. Name and A	ddress of Reportin	g Person *	2 Issuer	Name and '	Ticker or '	Fradin	a	5. Relationship of	Reporting Per	son(s) to	
				2. Issuer Name <b>and</b> Ticker or Trading ymbol				Issuer		(-)	
			-	DUSTRIE	S CORP	[CT]	IB1				
(Leat)	(First)	(MGddla)				[01]		(Chec	k all applicable	e)	
(Last)	(First)	(Middle)		Earliest Tra	insaction			Director	100	Owner	
22160 NORTH PEPER ROAD			(Month/Day/Year) 05/13/2008						title Other (specify		
			05/15/20	/00				below)	below)		
									ident Manufact	-	
(Street)			4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check			
		th/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person					
BARRINGT	FON, IL 60010		05/15/20	108					fore than One Re		
DAKKINOI	101N, 1L 00010							Person			
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	Securi	ties Ac	quired, Disposed of	f, or Beneficial	lly Owned	
1.Title of	2. Transaction D	ate 2A. Dee	emed	3.	4. Securi			5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Yea								Form: Direct		
(Instr. 3)		any (Month)	CodeDisposed of (D)//Day/Year)(Instr. 8)(Instr. 3, 4 and 5)				•		Beneficial Ownership		
		(WORLD	Day/1Cal)	(msu. 5, 4 and 5)				(Instr. 4)	(Instr. 4)		
						(A)		Reported	. ,		
						(A) or		Transaction(s)			
				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common Stock <sup>(1)</sup>	05/13/2008			Р	2,600	А	\$ 4.6	36,365	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)	Code	5. iorNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Titl Amou Under Securi (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	′ (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## Edgar Filing: CTI INDUSTRIES CORP - Form 4/A

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
ANDERSON BRENT 22160 NORTH PEPER ROAD BARRINGTON, IL 60010			Vice President Manufacturing					
Signatures								
Jonathan K. Miller, Attorney in Anderson	Fact Bren	ıt	05/15/2008					
<u>**</u> Signature of Reporting Per	son		Date					
Explanation of Poenoneoe:								

## **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) When this Form 4 was originally filed the signature was incorrect. All other information was correct.

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.