## Edgar Filing: CTI INDUSTRIES CORP - Form 4

CTI INDUS	TRIES CORP										
Form 4											
June 19, 200	)8										
FORM	ΠΔ								OMB AF	PROVAL	
	UNITED	STATES		RITIES A shington,			NGE C	OMMISSION	OMB Number:	3235-0287	
Check this box									Expires:	January 31,	
if no lon subject to		IENT OF	CHAN	GES IN BENEFICIAL OWNERS				<b>ERSHIP OF</b>		2005 average	
Section									Estimated average burden hours per		
Form 4 c	-								response 0.5		
Form 5 obligatio	<b>n</b> o <b>-</b>						-	e Act of 1934,			
may con				•	•	· ·		1935 or Section	1		
See Instr	ruction	30(h) c	of the In	vestment	Compar	iy Ac	t of 1940	)			
1(b).											
(Print or Type	Responses)										
(I IIII of I Jpe	(esponses)										
1. Name and A	Address of Reporting	Person <u>*</u>	2. Issue	r Name <b>and</b>	l Ticker or	Tradi	ng	5. Relationship of	Reporting Pers	on(s) to	
MERRICK	STEPHEN M		Symbol	-				Issuer			
				NDUSTRIES CORP [CTIB]							
(Last)	(First) (N	Middle)	3 Date o	f Earliest Tr	ansaction	-	-	(Check	c all applicable	)	
()	() (-	· · · · · ·		h/Day/Year)				_X_ Director _X_ 10% Owner			
22160 NORTH PEPER ROAD 06/17/2				•				$X_{\text{balaw}}$ Officer (give title Other (specify balaw)			
								below) Secretar	below) y, Executive V	νP	
	(Street)		1 If Am	ndmont Do	to Origina	1			-		
				Amendment, Date Original Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)			
			I nea(mo	nii/Duy/Tea	)			_X_Form filed by O	ne Reporting Per	rson	
BARRING	TON, IL 60010							Form filed by M Person	ore than One Reg	porting	
$\langle \mathbf{C}^{*} \rangle$		(7.)						reison			
(City)	(State)	(Zip)	Tab	e I - Non-D	Derivative	Secu	ities Acqu	iired, Disposed of,	or Beneficial	y Owned	
1.Title of	2. Transaction Date			3.	4. Securit			5. Amount of	6.	7. Nature of	
Security	(Month/Day/Year)	Execution	Date, if	Transactio		~		Securities Beneficially	Ownership Form: Direct	Indirect	
(Instr. 3)		any (Month/Da	Code (Instr. 3, 4 and 5) Day/Year) (Instr. 8)					Owned	(D) or	Ownership	
		(11101111)20	.j, 1 e)	(1115111-0)				Following	Indirect (I)	(Instr. 4)	
						(A)		Reported	(Instr. 4)		
						or		Transaction(s) (Instr. 3 and 4)			
~				Code V	Amount	(D)	Price	(insu: 5 and 4)			
Common Stock	06/17/2008			Р	3,600	А	\$ 5.1632	112,935	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. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Amou Unde Secur	le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code V		Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships							
	Director	10% Owner	Officer	Other				
MERRICK STEPHEN M 22160 NORTH PEPER ROAD BARRINGTON, IL 60010	Х	Х	Secretary, Executive VP					
Signatures								
Jonathan K. Miller, Attorney in Merrick	hen M.	06/19/2008						
<u>**</u> Signature of Reporting		Date						
Explanation of Posponsos:								

## 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).

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.