Edgar Filing: KORNBLATT DAVID - Form 4

KORNBLA	TT DAVID										
Form 4											
April 25, 20											
FORM	14		CECUT				NCEO	OMMISSION		PROVAL	
		LDSIAIES		shington,			NGE C	UNIVIISSIUN	OMB Number:	3235-0287	
Check th			• • • •	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	D .C. 2 0	015			Expires:	January 31,	
if no long subject to	if no longer subject to STATEMENT OF CHAN				GES IN BENEFICIAL OWN					2005	
Section 16.				SECURITIES					Estimated average burden hours per		
	Form 4 or								response		
Form 5 obligatio		*					U	e Act of 1934,			
may con	tinue. Section			vestment	•	· ·		1935 or Section	1		
See Instr 1(b).	uction	50(II)	of the fil	vestment	Compan	y At	1 01 194	0			
1(0).											
(Print or Type]	Responses)										
1 Name and /	Address of Report	ing Domon *	. .		T . 1			5 Deletionship of	Donorting Dara	on(s) to	
	Address of Report			er Name and Ticker or Trading			5. Relationship of Reporting Person(s) to Issuer				
Symbol				MPH GROUP INC [TGI]							
			of Earliest Transaction (Che				ck all applicable)				
(Last) (First) (Middle) 3. Date of (Month/D 899 CASSATT ROAD, SUITE 210 04/24/20							Director	10%	Owner		
				-				X_ Officer (give title Other (specify below)			
								below) Exec VP,	CFO and Treas	surer	
	(Street)		4. If Ame	ndment, Da	te Origina	1		6. Individual or Jo	int/Group Filin	g(Check	
			/onth/Day/Year)				Applicable Line)				
								X Form filed by C Form filed by M			
BERWYN,	PA 19312							Person	ore than one Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Securi	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction	Date 2A. Deer	med	3.	4. Securi			5. Amount of	6. Ownership		
Security (Instr. 3)	(Month/Day/Year) Execution Date			Transactio		-		Securities Beneficially	Form: Direct (D) or	Indirect Beneficial	
(11150.5)		any (Month/I	Code (Instr. 3, 4 and 5) (Instr. 8)				Owned	Indirect (I) Owners			
			•					Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported Transaction(s)			
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common	04/04/0010				2,541		\$	(111)	D		
Stock	04/24/2012			F	(1)	D	61.03	64,116	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. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Title Amou Under Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Addr	·ess	Relationships						
	Director	10% Owner	Officer	Other				
KORNBLATT DAVID 899 CASSATT ROAD SUITE 210 BERWYN, PA 19312			Exec VP, CFO and Treasurer					
Signatures								
M. David Kornblatt	04/25/2012							
<u>**</u> 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) The disposition consisted of shares of company stock withheld by the company to satisfy tax withholding obligations of the reporting person arising upon the lapse of restrictions on restricted stock, the acquisition of which was previously reported.

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.