## Edgar Filing: COMPUTER PROGRAMS & SYSTEMS INC - Form 3/A

#### COMPUTER PROGRAMS & SYSTEMS INC

Form 3/A

February 09, 2016

#### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

**OMB APPROVAL** 

**OMB** Number:

3235-0104

0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES** 

January 31, Expires: 2005

Estimated average burden hours per response...

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person \*

A Bauleke Christopher Scott

(Last) (First) (Middle)

6600 WALL STREET

(Street)

MOBILE, ALÂ 36608

(City) (State) (Zip)

1. Title of Security (Instr. 4)

2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol Statement

(Month/Day/Year)

01/25/2016

4. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

Director 10% Owner \_X\_\_ Officer Other (give title below) (specify below)

CEO of Healthland Holding Inc.

COMPUTER PROGRAMS & SYSTEMS INC [CPSI]

5. If Amendment, Date Original

Filed(Month/Day/Year)

01/26/2016

6. Individual or Joint/Group

Filing(Check Applicable Line) \_X\_ Form filed by One Reporting

Form filed by More than One

Reporting Person

4. Nature of Indirect Beneficial

#### Table I - Non-Derivative Securities Beneficially Owned

2. Amount of Securities Beneficially Owned

(Instr. 4)

Ownership Form: Direct (D) or Indirect

Ownership (Instr. 5)

(I) (Instr. 5)

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.

SEC 1473 (7-02)

### Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)

2. Date Exercisable and **Expiration Date** (Month/Day/Year)

3. Title and Amount of Securities Underlying **Derivative Security** (Instr. 4)

4. Conversion or Exercise Price of Derivative

Security

5. Ownership Form of Derivative Security:

6. Nature of Indirect Beneficial Ownership (Instr. 5)

Date Expiration Exercisable Date

Title

Amount or Number of Shares

Direct (D) or Indirect (I) (Instr. 5)

### Edgar Filing: COMPUTER PROGRAMS & SYSTEMS INC - Form 3/A

**Options to Purchase** Common Stock

(1)

Common 07/31/2023

 $66,009 \frac{(2)}{}$  \$ 5.94

D Â

# **Reporting Owners**

Reporting Owner Name / Address

Relationships

Director 10% Owner Officer

Other

Bauleke Christopher Scott 6600 WALL STREET MOBILE, Â ALÂ 36608

Â

CEO of Healthland Holding Inc.

**Signatures** 

/s/ Matt J. Chambless, by power of attorney

02/09/2016

\*\*Signature of Reporting Person

Date

## **Explanation of Responses:**

- If the form is filed by more than one reporting person, see Instruction 5(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) All of the options are time-based options which, as of January 8, 2016, became fully vested.
  - Received in connection with the merger of Healthland Holding Inc. into a subsidiary of the Issuer (the "Merger") in exchange for an employee stock option to acquire 1,603,619 shares of Healthland Holding Inc. common stock for \$0.25 per share. Of the 66,009 options
- (2) to purchase Issuer common stock issued to the reporting person in the Merger, 7,502 options are currently being held in escrow and are subject to forfeiture during the 15-month period following the Merger to satisfy indemnification payments and other payments that become payable to the Issuer pursuant to the merger agreement.
- 13,232 of these options to purchase common stock were omitted from the reporting person's original Form 3, and also were omitted from one Form 4 filed by the reporting person after his original Form 3 was filed.

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.

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