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Chapman Ro	bert L JR											
Form 4 June 05, 2009)											
,										OMB A	PPROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287			
Check this box if no longer										Expires:	January 31,	
subject to STATEMENT OF CHANC							CIAI	LOW	NERSHIP OF	Estimated	2005 average	
Section 16. SECURITIES									burden hours per response 0.5			
Form 5	Filed	pursuant to	Section 10	6(a) of tl	he Se	curiti	es Ex	chang	ge Act of 1934,	10300130	0.0	
obligation may conti <i>See</i> Instru	nue. Section		Public Ut) of the In	•	•		• •		f 1935 or Sectio 40	n		
1(b).												
(Print or Type R	esponses)											
Chapman Robert L JR Symbol				er Name and Ticker or Trading				-	5. Relationship of Reporting Person(s) to Issuer			
				I HOLDINGS, INC. [EDCI]				[I]	(Check all applicable)			
(Month/Da				ate of Earliest Transaction nth/Day/Year) 03/2009								
									X Director 10% Own _X_ Officer (give title Other (spe			
1700 211011			00/05/20						below) Chief	below) Executive Offic	cer	
	(Street)		4. If Ame	ndment. D	Date Or	riginal			6. Individual or J			
				Ionth/Day/Year)					Applicable Line)			
NEW YORK	K, NY 10019								_X_ Form filed by M Form filed by M Person	One Reporting Po More than One Ro		
(City)	(State)	(Zip)	Table	e I - Non-	Deriv	ative S	ecuri	ties Ac	quired, Disposed o	f, or Beneficia	llv Owned	
1.Title of	2. Transaction	Date 2A. De		3.		Securit			5. Amount of	6. Ownership	-	
Security	(Month/Day/Y								Form: Direct	Indirect		
(Instr. 3)		any (Month	CodeDisposed of (D)/Day/Year)(Instr. 8)(Instr. 3, 4 and 5)						•		Beneficial Ownership	
									Following Reported	(Instr. 4)	(Instr. 4)	
							(A)		Transaction(s)			
				Code	V Aı	mount	or (D)	Price	(Instr. 3 and 4)			
Common Stock	06/03/2009			А	4,	172	А	<u>(1)</u>	72,047	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)	4. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D)		ate	Amou Unde Secur	le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans
			Code V	of (D) (Instr. 3, 4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr

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Reporting Owners

Reporting Owner Name / Address	Relationships							
1 9	Director	10% Owner	Officer	Other				
Chapman Robert L JR 1755 BROADWAY, 4TH FLOOR NEW YORK, NY 10019	Х		Chief Executive Officer					
Signatures								
Ashley Burris for Robert L.								
Chapman, Jr.		06/05/2009						
<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).

Shares issued per terms of the Reporting Person's Employment Agreement, dated January 2, 2009, as compensation for services

rendered to the Issuer during the month of May 2009. The number of shares issued was calculated based upon a price per share of (1)\$4.494, the average closing price of the Issuer's common stock on the Nasdaq Stock Market for the immediately preceding monthly period.

Remarks:

May be deemed to be a member of Section 13(d) "group" owning more than 10% of the issuer's common stock; disclaims benefities a section of the section of th

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.