Edgar Filing: Dellovo Victor - Form 4

Dellovo Vict	or												
Form 4													
January 17, 2	2012												
FORM	14									OMB A	PROVAL		
UNITED STATES SECURITIES AND EXCHANGE COM Washington, D.C. 20549							COMMISSION	OMB Number:	3235-0287				
Check this box										Expires:	January 31,		
subject to	if no longer subject to STATEMENT OF CHAN				GES IN BENEFICIAL OWN				NERSHIP OF	Estimated a	2005 Laverage		
Section 1					CURITIES					burden hours per			
Form 4 or Form 5										response 0.5			
obligation	.	•						•	e Act of 1934,				
may cont	inue. Section			•		-			f 1935 or Section	n			
See Instru	uction	50(n) of the In	vesunen		mpany	Act	01 194	+0				
1(b).													
(Print or Type F	Responses)												
	ddress of Reporti	ing Person [*]	2. Issuer	r Name and Ticker or Trading			5. Relationship of Reporting Person(s) to						
$\mathbf{D} = 11 = \mathbf{V} \mathbf{C} = 1 = \mathbf{V}$				Symbol					Issuer				
(CSP IN	CSP INC /MA/ [CSPI]					(Check all applicable)				
(Last)	(First)	(Middle)	3. Date of Earliest Transaction					(Chee)	ek all applicable)				
			(Month/D	(Month/Day/Year)					Director 10% Owner				
1500 S POV	VERLINE RO	AD	01/13/20)12					X Officer (give below)	title Other below)	er (specify		
									· · · · · · · · · · · · · · · · · · ·	ys & Sol Mode	omp		
	(Street)		4. If Ame	ndment, D	Date (Original			6. Individual or Jo	int/Group Filir	1g(Check		
				ed(Month/Day/Year)					Applicable Line)				
									X Form filed by C				
DEERFIEL									Form filed by M Person	lore than One Re	porting		
BEACH, FL	2 33442-8126												
(City)	(State)	(Zip)	Table	e I - Non-	Deri	vative S	ecurit	ies Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of	2. Transaction	Date 2A. De	emed	3.	4.	. Securit	ies Ac	quired	5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Ye	·	cution Date, if Transaction(A) or Disposed of					of		Form: Direct	Indirect Beneficial		
(Instr. 3)		any (Month	/Day/Year)	Code (D) (Instr. 8) (Instr. 3, 4 and 5)				5)		· /	Ownership		
		(j)	(Following		(Instr. 4)				
							(A)		Reported				
							or		Transaction(s) (Instr. 3 and 4)				
~				Code	V A	Amount	(D)	Price	(mou. 5 and 4)				
Common	01/12/2012				1	0 000		¢ 0	25 150	D			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

А

01/13/2012

Stock

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.

D

\$0 35,158

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

10,000 A

Edgar Filing: Dellovo Victor - Form 4

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. oriNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		te	7. Title and A Underlying S (Instr. 3 and	Securities	8. Pri Deriv Secu (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option Right To Buy	\$ 2.7					05/30/2004	05/29/2013	Common Stock	35,000	
Stock Option Right To Buy	\$ 10.03					12/31/2005	12/29/2014	Common Stock	5,000	
Stock Option Right To Buy	\$ 6.5					01/17/2007	01/16/2016	Common Stock	2,000	
Stock Option Right To Buy	\$ 9.3					02/21/2008	02/20/2017	Common Stock	1,000	
Stock Option Right To Buy	\$ 6.82					12/12/2008	12/11/2017	Common Stock	2,000	
Stock Option Right To Buy	\$ 2.99					12/18/2009	12/17/2018	Common Stock	2,000	

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Dellovo Victor 1500 S POWERLINE ROAD DEERFIELD BEACH, FL 33442-8126			Pres of Sys & Sol Modcomp					

Signatures

Victor Dellovo

01/17/2012

**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).

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.