Edgar Filing: GOLDSTEIN STEVEN R MD - Form 4

| GOLDSTEI Form 4 April 29, 20 | N STEVEN R 1 | MD | | | | | | | | | |
|-------------------------------------------------------------------------------------------------------------------------------|--------------|---------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------------------------------------------------------------------------|-----------|-------------|-----------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|--------------|--|
| FORM | | | | | | | | | OMB AF | PPROVAL | |
| | UNITE | D STATES | S SECURITIES AND EXCHANGE CO Washington, D.C. 20549 | | | | | OMMISSION | OMB Number: | 3235-0287 | |
| Subject to Section 16. Form 4 or Form 5 obligations may continue. Filed pursuant to Section 17(a) of the | | | F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Section 16(a) of the Securities Exchange Act of 1934, Public Utility Holding Company Act of 1935 or Section of the Investment Company Act of 1940 | | | | | | Anuary 31 Expires: 2005 Estimated average burden hours per response 0.5 n | | |
| 1(b). | uction | () | | | · · · | 5 | | | | | |
| (Print or Type I | Responses) | | | | | | | | | | |
| | | | Symbol | Name and | | | ng | 5. Relationship of Reporting Person(s) to Issuer | | | |
| | | | 3. Date of Earliest Transaction | | | | | (Check all applicable) | | | |
| 21919 30TH DR SE (Street) | | | (Month/Day/Year) 04/28/2011 | | | | | XDirector10% Owner Officer (give titleOther (specify below)below) | | | |
| | | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| BOTHELL, | WA 98021 | | | | | | | Form filed by M Person | lore than One Re | porting | |
| (City) | (State) | (Zip) | Tabl | e I - Non-D | erivative | Secur | ities Acq | uired, Disposed of | , or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | | 2. Transaction Date 2A. Deemo (Month/Day/Year) Execution any (Month/Da | | | Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) ay/Year) (Instr. 8) (A) | | | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of | |
| | | | | Code V | Amount | or (D) | Price | Transaction(s) (Instr. 3 and 4) | | | |
| Common Stock | 04/28/2011 | | | S | 4,511 | D | \$ 34.9 | 18,118 | D | | |
| Common Stock | 04/28/2011 | | | S | 165 | D | \$ 34.93 | 17,953 | 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. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr |
|-----------------------------------------------------|-----------------------------------------------------------------------|-----------------------------------------|-------------------------------------------------------------|----------------------------------------|-------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|--------------------|---------------------------------------------------------------------------|----------------------------------------|-----------------------------------------------------|----------------------------------------------------------------------------|
| Repor | rting O | wners | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

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| Reporting Owner Name / Address | | Relationsh | | | |
|----------------------------------------------------------------|------------|------------|---------|-------|--|
| | Director | 10% Owner | Officer | Other | |
| GOLDSTEIN STEVEN R MD 21919 30TH DR SE BOTHELL, WA 98021 | Х | | | | |
| Signatures | | | | | |
| Shannon Atchison, Attorney-In- M.D. | 04/29/2011 | | | | |

**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.