Edgar Filing: KIRSHNER BENJAMIN A. - Form 4

KIRSHNER I	BENJAMIN A	4.											
Form 4	10												
March 12, 20										OMB A	PPROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSIO Washington, D.C. 20549							COMMISSION		3235-0287				
Check this box if no longer subject to STATEMENT OF CHANG				GES IN BENEFICIAL OWNERSHI SECURITIES						burden hou	Estimated average burden hours per		
Form 5 obligation may contin <i>See</i> Instruct 1(b).	Filed p s Section 1	7(a) of the		ility Ho	oldi	ing Com	ipany	Act o	ge Act of 1934, f 1935 or Sectic 40	response	. 0.3		
(Print or Type R	esponses)												
KIRSHNER BENJAMIN A. Symbol				The second terms of the second s					5. Relationship of Reporting Person(s) to Issuer				
(Last)	Last) (First) (Middle) 3. Date of Earliest Transaction					I]	(Check all applicable)						
(Month/				nth/Day/Year) 08/2019					_X_Director10% Owner Officer (give titleOther (specify below)below)				
				Amendment, Date Original Month/Day/Year)					 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 				
FORT WAS	HINGTON, P	A 19034							Form filed by M Person	More than One Ro	eporting		
(City)	(State)	(Zip)	Table	I - Non	-De	rivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficial	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction I (Month/Day/Ye	ear) Executio any	emed 3. 4. on Date, if TransactionAc Code Di /Day/Year) (Instr. 8) (In		(Instr. 3, 4 and 5) (A) or			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
Common Stock	03/08/2019			A	V	Amount 422	(D) A	Price (<u>1)</u>	422	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)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. tionNumber of) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)				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
			Code V	′ (A) ((D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address		Relationsh	ips	
, of the second s	Director	10% Owner	Officer	Other
KIRSHNER BENJAMIN A. 600 OFFICE CENTER DRIVE FORT WASHINGTON, PA 19034	Х			
Signatures				
/s/ Mary Flipse, by power of attorne Kirshner	jamin A.		03/12/2019	
**Signature of Reporting		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).

Received in exchange for 1,972 shares of common stock of Nutrisystem, Inc., a Delaware corporation ("Nutrisystem") in connection with the merger of Nutrisystem with and into Sweet Acquisition, Inc., a Delaware corporation and wholly owned subsidiary of the Issuer

("Merger Sub"), pursuant to that certain Agreement and Plan of Merger, dated December 9, 2018, by and between the Issuer, Merger Sub (1) and Nutrisystem. On March 7, 2019, the last day Nutrisystem's common stock was publicly traded, the closing price of Nutrisystem's common stock was \$42.89 per share, and on March 8, 2019, the date of the effective time of the merger, the closing price of the Issuer's common stock was \$19.42 per share.

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.