Edgar Filing: Arway Patricia M - Form 4

Arway Patrici Form 4										
Check this if no longe subject to Section 16	FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 STATEMENT OF CHANCES IN RENEFICIAL OWNERSHIP OF						OMB Number: Expires: Estimated a burden hou	Number: 3235-0287 Expires: January 31, 2005 Estimated average burden hours per		
Form 5 obligation may contin <i>See</i> Instruc							response 0. n			
(Print or Type R	esponses)									
Arway Patricia M Symbol			suer Name and bl ITA INC [D		Гradin	g	5. Relationship of Reporting Person(s) to Issuer			
401 HAWAII ST. (Month/Da (Street) 4. If Amen			. Date of Earliest Transaction Month/Day/Year))7/16/2009				(Check all applicable) <u>X</u> Director Officer (give title 10% Owner below) Director below)			
			mendment, Da Month/Day/Year	-			 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
(City)		(Zip) T					Person			
		1				ties Ac	quired, Disposed o		-	
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)		Code ar) (Instr. 8)	4. Securi onAcquired Disposed (Instr. 3, Amount	l (A) o l of (D 4 and (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	07/16/2009		A	163	A	\$ 0	186	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	2. Conversion	3. Transaction Date (Month/Day/Year)		4. Transactio	5. orNumber	6. Date Exer Expiration D		7. Title and Amount of	8. Price of Derivative	9. Nu Deriv
Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	of (Month/Day/Year) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Underlying Securities (Instr. 3 and	Security (Instr. 5) 4)	Secur Bene Owno Follo Repo Trans (Instr	
				Code V	(A) (D) Date Exercisable	Expiration Date	Title Amou or Numb of Share	ber	

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Arway Patricia M 401 HAWAII ST. EL SEGUNDO, CA 90245	Х						
Signatures							
/s/ Corinna B. Polk Attorney-in-Fact		07/17/2009)				
**Signature of Reporting Person		Date					

**Signature of Reporting Person

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.