Edgar Filing: DERMA SCIENCES, INC. - Form 4

DERMA SCI Form 4											
May 23, 2014									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 subject to Section 16. Form 4 or							burden hou	Expires:January 31 2005Estimated average burden hours per response0.5			
Form 5 obligation: may contin <i>See</i> Instruct 1(b).	s Section 1	7(a) of the		ility Hold	ing Com	pany	Act o	ge Act of 1934, f 1935 or Sectio 40	n		
(Print or Type Ro	esponses)										
 (Print or Type Responses) 1. Name and Address of Reporting Person [*]/₋ 2. Issuer Name and Ticker or Transported Symbol DERMA SCIENCES, INC. [(Last) (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) 			-	5. Relationship of Reporting Person(s) to Issuer							
(Last)	(First)	(Middle)				[D.	SCI	(Chec	ck all applicable	e)	
DERMA SC	IENCES, INC CENTER, SU	., 214		ay/Year)	insterion			X Director Officer (give below)		b Owner er (specify	
				ndment, Dat th/Day/Year)	-			 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 			
PRINCETON	N, NJ 08540							Form filed by M Person	More than One Ro	eporting	
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	ecuri	ties Ac	quired, Disposed of	f, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction I (Month/Day/Ye	ransaction Date 2A. Deemed hth/Day/Year) Execution Date, if any (Month/Day/Year)		(A) or				5. Amount of Securities Beneficially Owned Following Transaction(s) (Instr. 3 and 4)		p 7. Nature of t Indirect Beneficial Ownership (Instr. 4)	
Common Stock	05/21/2014			Code V A	Amount 7,750	(D) A	Price \$ 0 (2)	74,963 <u>(3)</u>	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. Transac Code (Instr. 8	 5. tionNumber of Derivativ 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 Owno Follo Repo Trans (Instr
				Code	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Relationships **Reporting Owner Name / Address** Director 10% Owner Officer Other WESSON BRUCE F DERMA SCIENCES, INC. Х 214 CARNEGIE CENTER, SUITE 300 PRINCETON, NJ 08540 Signatures /s/ Bruce F. 05/23/2014 Wesson **Signature of 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).
- (1) The shares of common stock reported herein represent restricted stock units issued under the issuer's equity incentive plan in consideration of the reporting person's services to the issuer and will vest on May 21, 2015.
- (2) Upon vesting, the reporting person will receive the number of shares of the issuer's common stock equal to the number of restricted stock units previously granted, without the payment of further consideration.
- (3) Includes 26,088 shares held in an IRA account.

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.