#### STILLER ROBERT P

Form 4 May 04, 2012

## FORM 4

### **OMB APPROVAL**

3235-0287

January 31,

#### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number:

Check this box if no longer subject to Section 16. Form 4 or

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Expires: 2005 Estimated average burden hours per response... 0.5

Form 5 obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* STILLER ROBERT P

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to Issuer

(Last)

(City)

(First) (Middle)

(Zip)

NOBLE ROMANS INC [NROM]

3. Date of Earliest Transaction

(Check all applicable)

C/O SUNRISE MANAGEMENT

(Street)

(State)

(Month/Day/Year) 05/02/2012

Director X\_\_ 10% Owner Other (specify Officer (give title below)

SERVICES, LLC, PO BOX 2263

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 Form filed by More than One Reporting

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

SO. BURLINGTON, VT 05407

	Tubbe 1 Tion 2 011 tubbe 5 0 001 100 110 quitous, 2 15 posseu os, or 2 0 100 100 100 100 100 100 100 100 100										
1.Title of	2. Transaction Date	2A. Deemed	3. 4. Securities Acquired (A)			5. Amount of	6.	7. Nature of			
Security	(Month/Day/Year)	Execution Date, if	Transaction Disposed of (D)				Securities	Ownership	Indirect		
(Instr. 3)		any	Code (Instr. 3, 4 and 5)			Beneficially	Form:	Beneficial			
		(Month/Day/Year)	(Instr. 8)			Owned	Direct (D)	Ownership			
		•					Following	or Indirect	(Instr. 4)		
							Reported	(I)			
					(A)		Transaction(s)	(Instr. 4)			
					or		(Instr. 3 and 4)				
			Code V	Amount	(D)	Price	· ·				
Common	05/02/2012		S	92,500	D	\$	3,766,740	D			
Stock	03/02/2012		S	,500		0.5956	3,700,710	D			
						Φ.					
Common	05/03/2012		S	97,500	D	\$	3,669,240	D			
Stock	05,05,2012			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		0.5261	2,002,210				

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

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# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	isable and	7. Title	e and	8. Price of	9
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration Da	ate	Amou	nt of	Derivative	]
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ties	(Instr. 5)	]
	Derivative				Securities			(Instr.	3 and 4)		(
	Security				Acquired						J
	Ĭ				(A) or						J
					Disposed						-
					of (D)						(
					(Instr. 3,						
					4, and 5)						
					, ,						
									Amount		
						Date	Expiration		or		
						Exercisable	Date		Number		
									of		
				Code V	(A) (D)				Shares		

## **Reporting Owners**

Reporting Owner Name / Address

Director 10% Owner Officer Other 9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

STILLER ROBERT P C/O SUNRISE MANAGEMENT SERVICES, LLC PO BOX 2263 SO. BURLINGTON, VT 05407



## **Signatures**

/s/ Robert P. 05/04/2012 Stiller

\*\*Signature of Date
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. amily:Times New Roman">After due inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

MYLAN N.V.

By: /s/ Kenneth S. Parks
Name: Kenneth S. Parks
Title: Chief Financial Officer

Date: July 21, 2016

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