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Form 4	THOMAS C								
November 02									PPROVAL
FORM	4 UNITED S	STATES SECUR				NGE C	OMMISSION	OMB	3235-0287
Check thi	is box	Was	shington,	D.C. 20	549			Number:	January 31,
if no long subject to Section 1 Form 4 o	6.	ENT OF CHAN	GES IN SECUR		NERSHIP OF	Expires: Estimated a burden hou response	2005 average		
Form 5 obligation may cont <i>See</i> Instru 1(b).	ns Section 17(a	suant to Section 1 a) of the Public U 30(h) of the In	tility Holo	ling Con	npany	y Act of	1935 or Section	1	
(Print or Type F	Responses)								
	ddress of Reporting F	Symbol	r Name and SYS INC			ng	5. Relationship of Issuer		
(Last)	(First) (N		f Earliest Tr	-			(Checl	k all applicable	;)
30946 LAKE ROAD 09/05/20			Day/Year)				X_ Director 10% Owner Officer (give title Other (specify below) below)		
BAY VILL	(Street) AGE, OH 44140		ndment, Da nth/Day/Year	-	1		6. Individual or Jo Applicable Line) _X_ Form filed by C Form filed by M	one Reporting Pe	rson
(City)		(Zip) Tabl	e I - Non-D) erivative	Secur	ities Aca	Person uired, Disposed of	. or Beneficial	lv Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		3. Transactio Code (Instr. 8)	4. Securi	ties Ad ispose 4 and	cquired d of (D)	5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of
Common			Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		
shares, without par value	09/05/2007		М	7,500	A	\$ 13.5	21,895	D	
Common shares, without par value	09/05/2007		М	7,500	A	\$ 14.25	29,395	D	
Common shares, without par value	09/05/2007		М	7,500	A	\$ 11.17	36,895	D	

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Common shares, without par value	09/05/2007	М	7,500	A	\$ 9.31	44,395	D
Common shares, without par value	09/05/2007	М	7,500	A	\$ 8.54	51,895	D
Common shares, without par value	09/05/2007	М	7,500	A	\$ 13.76	59,395	D
Common shares, without par value	09/05/2007	М	7,500	A	\$ 13.57	66,895	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. Transactio Code (Instr. 8)	5. Number prof 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 of Underlyi Securities (Instr. 3 and	ng]
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Options to purchase common stock	\$ 13.5	09/05/2007		М	7,500	07/27/1999	07/27/2009	common shares	7,500
Options to purchase common stock	\$ 14.25	09/05/2007		М	7,500	07/25/2000	07/25/2010	common shares	7,500

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Options to purchase common stock	\$ 11.17	09/05/2007	М	7,500	07/24/2001	07/24/2011	common shares	7,500
Options to purchase common stock	\$ 9.31	09/05/2007	М	7,500	07/30/2002	07/30/2012	common shares	7,500
Options to purchase common stock	\$ 8.54	09/05/2007	М	7,500	07/29/2003	07/29/2013	common shares	7,500
Options to purchase common stock	\$ 13.76	09/05/2007	М	7,500	07/24/2004	07/24/2014	common shares	7,500
Options to purchase common stock	\$ 13.57	09/05/2007	М	7,500	04/28/2005	04/28/2015	common shares	7,500

Reporting Owners

Reporting Owner Name / Address		Relationsh		
	Director	10% Owner	Officer	Other
SULLIVAN THOMAS C				
30946 LAKE ROAD	Х			
BAY VILLAGE, OH 44140				
Signatures				
/s/ Rita A. Thomas, by power of Sullivan	11/02/2007			

*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.