Edgar Filing: INTEGRATED BIOPHARMA INC - Form 5

INTEGRATED BIOPHARMA INC

Form 5

August 15, 2008

FORM	15							OMB AF	PPROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB Number:	3235-0362		
Check this no longer s		Was	shington, D.	C. 20549				Expires:	January 31,		
to Section Form 4 or 5 5 obligatio may contin See Instruc	16. Form ANNU ns nue. etion	OWNER	IENT OF CHANGES IN BENE ERSHIP OF SECURITIES					Estimated a burden hou response			
1(b). Form 3 Ho Reported Form 4 Transaction Reported	oldings Section 17(a)	uant to Section 1 of the Public Ut 30(h) of the In	tility Holding	g Compar	ny Ao	et of 1		n			
Canarick Robert Symbol							5. Relationship of Reporting Person(s) to Issuer				
		[INBP]	INTEGRATED BIOPHARMA INC [INBP]				(Check all applicable)				
(Last)	, , , , , , , , , , , , , , , , , , , ,			nent for Issuer's Fiscal Year Ended Day/Year)					Owner er (specify		
C/O INTEG INC., 201	RATED BIOPHA ROUTE 22	RMA,									
			mendment, Date Original Month/Day/Year)				6. Individual or Joint/Group Reporting (check applicable line)				
HILLSIDE,	NJ 07205					_	X_ Form Filed by M Form Filed by Merson	One Reporting Pe More than One Re			
(City)	(State) (Z	Zip) Tabl	e I - Non-Deri	vative Secu	rities	Acquii	red, Disposed of	, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or		5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
Restricted Stock Unit	11/16/2007	Â	A4(1)	Amount 10,500	(D)	Price \$ 0 (1)	52,433 (2)	D	Â		
	ort on a separate line for icially owned directly		contained in	n this form	are	not red	ection of infor quired to resp id OMB contro	ond unless	SEC 2270 (9-02)		

OMB APPROVAL

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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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		erivative Expiration Date courities (Month/Day/Year) cquired (A) Disposed (D) nstr. 3, 4,		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
					(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Options	\$ 3.05	11/16/2007	Â	A4 (3)	4,500	Â	(3)	11/02/2017	Common Stock	4,500

Reporting Owners

Reporting Owner Name / Address	Relationships						
. 9	Director	10% Owner	Officer	Othe			
Canarick Robert							
C/O INTEGRATED BIOPHARMA, INC.	λv	Â	Â	Â			
201 ROUTE 22	ΑΛ	A	А	А			
HILLSIDE, NJ 07205							

Signatures

/s/ ROBERT CANARICK 08/15/2008

**Signature of Reporting
Person

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Date

- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- On November 16, 2007, the Reporting Person was granted 10,500 Restricted Stock Units as compensation for serving as an independent director of the Issuer. Each Restricted Stock Unit consists of a right to the issuance of one share of Common Stock. The Restricted Stock Units are subject to a one-year vesting period.
- (2) Represents the amount of securities beneficially owned by the Reporting Person as of the date hereof.
- On November 16, 2007, the Reporting Person was granted a stock option to purchase 4,500 shares of Common Stock at an exercise price of \$3.05 per share as compensation for serving as an independent director of the Issuer. These stock options are subject to a one-year vesting period, with an initial monthly vesting date of December 16, 2007.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.

Reporting Owners 2