## Edgar Filing: HOLT KENNETH L - Form 4

HOLT KEN	NETH L										
Form 4	2011										
January 13,									PPROVAL		
FORM	Л 4 <sub>UNITED</sub>	STATES	SECU	RITIES	AND EX(	CHANGE	<b>COMMISSION</b>	т	PPROVAL		
	UTITLD				, D.C. 20			OMB Number:	3235-0287		
Check t				0				Expires:	January 31,		
if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF							Estimated average				
Section	Section 16. SECURITIES							burden hou	urs per		
Form 4 Form 5	Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,							response	. 0.5		
obligati	ons Section 170						r of 1935 or Sectio	m			
may con See Inst	nunue.			•	t Compan	• •					
1(b).	luction	. ,			1	-					
	D \										
(Print or Type	Responses)										
1. Name and	Address of Reporting	Person *	2. Issue	er Name <b>an</b>	<b>d</b> Ticker or	Trading	5. Relationship of	Reporting Person(s) to			
HOLT KE	Symbol		• • • • • •		Issuer						
			ROCK	WELL M	IEDICAL		(Check all applicable)				
	TECH	NOLOGI	ES INC [I	RMTI]	(Check an applicable)						
(Last)	(First) (	Middle)		of Earliest T	ransaction		X Director		% Owner		
8217 VICTORIA LAKE DRIVE			(Month/Day/Year)			Officer (give below)	below)	er (specify			
8217 VICI	UKIA LAKE DR	IVE	01/11/2011								
(Street)					ate Original		6. Individual or J	ng(Check			
			Filed(Mo	onth/Day/Yea	ar)		Applicable Line) _X_ Form filed by	One Reporting P	erson		
WAXHAV	V, NC 28173							More than One R			
(City)	(State)	( <b>7</b> in)									
(City)	(State)	(Zip)	Tat	ole I - Non-	Derivative	Securities A	Acquired, Disposed o	f, or Beneficia	lly Owned		
1.Title of Security	2. Transaction Date			3. Transactio	4. Securiti onAcquired (			6. Ownership Form: Direct	7. Nature of Indirect		
(Instr. 3)	(Month/Day/Year)	Execution Date, if any		Code	Disposed (			(D) or Indirect			
		(Month/D	Day/Year) (Instr. 8) (Instr. 3, 4 a						Ownership		
							Following ( Reported	(Instr. 4)	(Instr. 4)		
						(A) or	Transaction(s)				
				Code V	Amount	(D) Price	(Instr. 3 and 4)				
Pamindar: Pa	port on a separate line	a for each c	lass of sec	urities bene	ficially own	ad directly	or indirectly				
Kellindel. Ke	port on a separate mit			unities bene	-	-	spond to the collect	ction of S	SEC 1474		
					inform	ation con	tained in this form	are not	(9-02)		
							ond unless the for ntly valid OMB cor				
					numbe						

 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. Number of	6. Date Exercisable and	7. Title and Amount	8.
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	of Underlying	D
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	Securities	Se

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(Instr. 3)	Price of Derivative Security	(Mon	th/Day/Year)	(Instr.	8)	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			(Instr. 3 and 4)		(Iı	
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
stock option (right to buy)	\$ 8.47	01/11/2011		A		50,000		<u>(1)</u>	01/11/2021	common stock	50,000	

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships							
hepotong o whet there i there of	Director	10% Owner	Officer	Other				
HOLT KENNETH L 8217 VICTORIA LAKE DRIVE WAXHAW, NC 28173	Х							
Signatures								
/s/Thomas E. Klema, attorney-in-f L. Holt	fact for K	enneth	(	01/13/2011				
**Signature of Reporting Pe			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 option vests in three equal installments on January 11, 2012, January 11, 2013 and January 11, 2014.

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.