HUTCHISON BRIAN K

Form 4

February 13, 2012

FORM 4

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

OMB

Estimated average

Check this box if no longer subject to Section 16.

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

3235-0287 Number: January 31, Expires:

2005

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OMB APPROVAL

Form 4 or Form 5 obligations

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

burden hours per response...

See Instruction 1(b).

(Print or Type Responses)

may continue.

1. Name and Add HUTCHISON	ress of Reporting Person BRIAN K	2. Issuer Name and Ticker or Trading Symbol RTI Biologics, Inc. [RTIX]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First) (Middle)	3. Date of Earliest Transaction	(Check an applicable)			
		(Month/Day/Year)	Director 10% Owner			
	LOGICS, INC., 1162	1 02/09/2012	X Officer (give title Other (specify below)			
RESEARCH O	CIRCLE		President and CEO			
	(Street)	4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check			
		Filed(Month/Day/Year)	Applicable Line)			
ALACHUA, F	FL 32615		_X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			

(City)	(State)	Zip) Table	e I - Non-De	erivative Securities Acq	quired, Disposed o	of, or Beneficial	lly Owned
1.Title of	2. Transaction Date	2A. Deemed	3.	4. Securities Acquired	5. Amount of	6. Ownership	7. Nature of
Security	(Month/Day/Year)	Execution Date, if	Transactio	n(A) or Disposed of	Securities	Form: Direct	Indirect
(Instr. 3)		any	Code	(D)	Beneficially	(D) or	Beneficial
		(Month/Day/Year)	(Instr. 8)	(Instr. 3, 4 and 5)	Owned	Indirect (I)	Ownership

	any	Code	(D)			Beneficially	(D) or
	(Month/Day/Year)	(Instr. 8)	(Instr. 3,	4 and 5	5)	Owned	Indirect (I)
						Following	(Instr. 4)
				()		Reported	
						Transaction(s)	
						(Instr. 3 and 4)	
		Code V	Amount	(D)	Price	(,	
02/09/2012		A	40,000	A	\$0	214,641	D
	02/09/2012	(Month/Day/Year)	(Month/Day/Year) (Instr. 8) Code V	(Month/Day/Year) (Instr. 8) (Instr. 3, 4) Code V Amount	(Month/Day/Year) (Instr. 8) (Instr. 3, 4 and 5 (A) or Code V Amount (D)	(Month/Day/Year) (Instr. 8) (Instr. 3, 4 and 5) (A) or Code V Amount (D) Price	(Month/Day/Year) (Instr. 8) (Instr. 3, 4 and 5) Owned Following Reported Transaction(s) (Instr. 3 and 4)

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

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

(Instr. 4)

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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 orDerivative Securities Acquired (A) Disposed of ((Instr. 3, 4, ar 5)) or (D)	6. Date Exerc Expiration D (Month/Day/	ate	7. Title and A Underlying S (Instr. 3 and	Securities
				Code V	(A) ((D)	Date Exercisable	Expiration Date	Title	Amount o Number o Shares
Option to purchase Common Stock \$.001 par value	\$ 4.02	02/09/2012		A	120,000		(2)	02/09/2022	Common Stock	120,000

Reporting Owners

D (O N / A I I	Relationships
Reporting Owner Name / Address	

Director 10% Owner Officer Other

HUTCHISON BRIAN K C/O RTI BIOLOGICS, INC. 11621 RESEARCH CIRCLE ALACHUA, FL 32615

President and CEO

Signatures

/s/ Brian K. 02/13/2012 Hutchison

**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).
- (1) The Restricted Stock Award will become vested as to 13,333 shares on each of 2/9/2013, 2/9/2014 and 13,334 shares on 2/9/2015.
- (2) This option will become exercisable as to 24,000 shares on each of 2/9/2013, 2/9/2014, 2/9/2015, 2/9/2016 and 2/9/2017.

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.

Reporting Owners 2