## Edgar Filing: OBRIEN JAMES T - Form 4

OBRIEN JAMES Form 4	Т										
January 04, 2006											
FORM 4			GEGUI				COMMERIO		OMB APPROVAL		
VIIIED STATES SEC				<b>CURITIES AND EXCHANGE COMMISSION</b> Washington, D.C. 20549					3235-0287		
Check this box if no longer subject to Section 16. Form 4 or Eorm 5	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES							Estimated burden hou response	urs per		
obligations may continue. <i>See</i> Instruction 1(b).	<i>See</i> Instruction 30(h) of the Investment Company Act of 1940										
(Print or Type Respon	nses)										
1. Name and Address of Reporting Person <u>*</u> OBRIEN JAMES T			2. Issuer Name <b>and</b> Ticker or Trading Symbol DERMA SCIENCES, INC. [DSCI]				5. Relationship of Reporting Person(s) to Issuer				
(Last) (First) (Middle)			3. Date of Earliest Transaction				(Check all applicable)				
(Last) (First) (Middle) DERMA SCIENCES, INC., 214 CARNEGIE CENTER, SUITE 100			(Month/Day/Year) 12/30/2005				X_ Director10% Owner Officer (give titleOther (specify below) below)				
·	(Street)			endment, D nth/Day/Yea	-	al	<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>				
PRINCETON, N	J 08450						Person		1 0		
(City) (A	State)	(Zip)	Tab	le I - Non-l	Derivative	Securities A	cquired, Disposed	of, or Beneficia	lly Owned		
	nsaction Date th/Day/Year)	2A. Deeme Execution I any (Month/Da	Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3,	(A) or of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Reminder: Report on	a separate line	for each cla	ass of secu	urities bene	-	-	-				
					inforr requi	nation cont red to resp ays a curre	spond to the colle ained in this forn ond unless the fo ntly valid OMB co	n are not orm	SEC 1474 (9-02)		

 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
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	orDerivative	Expiration Date	of Underlying
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	Securities

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8)	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	f		(Instr. 3 and 4)	
				Code V	7 (A) (D	) Date Exercisable	Expiration Date	Title	Amount or Number of Shares
stock option (right to buy)	\$ 0.9	12/30/2005		J <u>(1)</u>	5,000 (2)	12/30/2005	05/22/2013	common stock	5,000
stock option (right to buy)	\$ 0.7	12/30/2005		J <u>(1)</u>	10,000 (2)	12/30/2005	06/08/2014	common stock	10,000
stock option (right to buy)	\$ 0.42	12/30/2005		J <u>(1)</u>	15,000 (2)	12/30/2005	05/25/2015	common stock	15,000

## **Reporting Owners**

Relationships **Reporting Owner Name / Address** Director 10% Owner Officer Other **OBRIEN JAMES T** DERMA SCIENCES, INC. Х 214 CARNEGIE CENTER, SUITE 100 PRINCETON, NJ 08450 Signatures James T. O'Brien, by Raymond C. Hedger, Jr., Attorney In 01/04/2006 Fact \*\*Signature of 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).

Date

(1) Accelerated vesting of previously reported option.

(2) Represents a portion of a previously reported option grant which has vested earlier than the vesting schedule originally reported.

(3) The options were issued in consideration of the reporting person's services to the issuer and without payment of cash consideration.

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.