Edgar Filing: COOPER MILTON E - Form 4

COOPER MI	LTON E										
Form 4											
February 05,	2010										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSIO								OMB APPROVAL			
	UNITEL	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287	
Check this		(a singesi, 2002 of 19						January 31,			
if no long	er STATE	MENT O	F CHAN	CHANGES IN BENEFICIAL OWNERSHIP OF						2005	
Section 16.				SECURITIES					Estimated average burden hours per		
Form 4 or	Form 4 or								response	0.5	
Form 5	Filed pu	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,						•			
obligation may conti		7(a) of the	Public Ut	ility Hold	ing Com	pany	Act of	f 1935 or Sectio	n		
See Instru		30(h)	of the Inv	vestment	Company	/ Act	of 194	40			
1(b).											
(Print or Type R	esponses)										
1. Name and Address of Reporting Person <u>2</u> .				2. Issuer Name and Ticker or Trading				5. Relationship of Reporting Person(s) to			
COOPER M	Symbol				2	Issuer					
	L-1 IDENTITY SOLUTIONS, INC.				INC.	(Check all applicable)					
		[ID]									
(Last)	(First)	(Middle)	3. Date of	Earliest Tra	ansaction			X Director	10%	Owner	
(Mc			(Month/D	(Month/Day/Year)				Officer (give title Other (specify			
C/O L-1 IDE	ENTITY SOLU	TIONS,	02/03/20	010				below)	below)		
INC., 177 BI	ROAD STREE	T, 12TH									
FLOOR											
(Street)			4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check			
			Filed(Month/Day/Year)					Applicable Line)			
								_X_Form filed by (
STAMFORI	D, CT 06901							Form filed by M Person	fore than One Re	porting	
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	ecurit	ies Acq	uired, Disposed of	f, or Beneficial	ly Owned	
1.Title of	2. Transaction Da	ate 2A. Dee	med	3.	4. Securit	ies Ac	quired	5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Yea	r) Executio	on Date, if		on(A) or Dis	sposed	of		Form: Direct		
(Instr. 3)		any	Code (D) Day/Year) (Instr. 8) (Instr. 3, 4 and 5)			Beneficially		Beneficial			
		(Month/	Day/Year)	(Instr. 3, 4 and 5)			Owned Following	Indirect (I) Instr. 4)	Ownership (Instr. 4)		
								Reported	(111501. 4)	(111501. 4)	
						(A)		Transaction(s)			
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common	02/02/2010				10,417			47 1 47	D		
Stock	02/03/2010			А	(1)	А	\$0	47,147	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)

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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)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Titl Amou Under Secur (Instr.	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer Other				
COOPER MILTON E C/O L-1 IDENTITY SOLUTIONS, INC. 177 BROAD STREET, 12TH FLOOR STAMFORD, CT 06901	х						
Signatures							
Mark S. Molina for Milton E. Cooper by I Attorney		02/05/2010					
<u>**</u> 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).
- Restricted Stock Award. Shares of restricted stock vest in equal annual installments of 25% per year for four years from award date so (1) that the shares become fully vested after four years.

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.