Edgar Filing: Saeli Thomas Louis - Form 4

Saeli Thomas	s Louis										
Form 4											
June 02, 2010	0										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION										PPROVAL	
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								ONID	3235-0287		
Check thi	s box		Was	hington,	D.C. 20:	549			Number:	January 31,	
if no longer								Expires:	2005		
subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF								Estimated average			
	Section 16. SECURITIES							burden hours per			
Form 5	Form 4 or Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,							response 0.5			
obligation	1 0						-	f 1935 or Sectio	n		
may conti	inue.			vestment (•				11		
See Instru 1(b).	iction	50(11)	or the m	vestinent ·	compun	<i>y</i> 1100	. 01 17				
1(0).											
(Print or Type R	Responses)										
	ddress of Reporting	g Person *	2. Issuer	Name and	Ticker or '	Tradin	g	-	Reporting Person(s) to		
Saeli Thomas Louis Symbol Issuer											
ULTRALIFE CORP [ULBI]							ck all applicable)				
(Last)	(First)	(Middle)	3. Date of	Earliest Tra	ansaction			(Chee	k an applicable	5)	
(Month/Da							XDirector10% Owner				
ULTRALIFE 06/02/2010					Officer (give title Other (specify						
CORPORAT	ГION, 2000							below)	below)		
TECHNOLO	OGY PARKWA	Y									
				ndment, Date Original th/Day/Year)				6. Individual or Joint/Group Filing(Check			
								Applicable Line)			
X Form filed by C						One Reporting Person					
NEWARK, 2	NY 14513							Form filed by N Person	Nore than One Re	eporting	
(City)	(State)	(Zip)				~ .					
(City)	(blue)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Acc	uired, Disposed of	f, or Beneficial	ly Owned	
1.Title of	2. Transaction Da			3.4. Securities Acquired					6. Ownership		
Security (Instr. 3)	(Month/Day/Year	·	Execution Date, if any (Month/Day/Year)		Transaction(A) or Disposed of Code (D) (Instr. 8) (Instr. 3, 4 and 5)			Securities Beneficially	Form: Direct (D) or	ct Indirect Beneficial Ownership (Instr. 4)	
(Insu: 5)		-						Owned	Indirect (I)		
		(- /	Following (Instr. 4)			
					(A)			Reported			
						or		Transaction(s) (Instr. 3 and 4)			
				Code V	Amount	(D)	Price	(msu. 5 and 4)			
Common	0.610.010.010			-	1.000		\$	1 000	-		
Stock; \$.10	06/02/2010			Р	1,000	А	\$ 4.89	1,000	D		
par value											

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	2. Conversion	3. Transaction Date		4. Transactiv	5.	6. Date Exerc		7. Titl		8. Price of	9. Nu Dariy
Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	(Month/Day/Year)	Execution Date, if any (Month/Day/Year)	Transactic Code (Instr. 8)				Amou Under Securi (Instr.	lying	Derivative Security (Instr. 5)	Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address				
· · · · · · · · · · · · · · · · · · ·	Director	10% Owner	Officer	Other
Saeli Thomas Louis ULTRALIFE CORPORATION 2000 TECHNOLOGY PARKWAY NEWARK, NY 14513	Х			
Signatures				
/s/Peter F. Comerford - attorney-in-fa	omas L.	06/02/2010		
**Signature of Reporting Pers	son			Date
Evolution of Poon	20000			

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).

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.