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SOLOMON LEW	/IS										
Form 4 November 20, 200	09										
FORM 4									APPROVAL		
		STATES		RITIES A			COMMISSIO	N OMB Number:	3235-028	57	
Check this box if no longer subject to Section 16.		1ENT OI	F CHAN	NGES IN SECUF	Expires: Estimated burden ho						
Form 4 or Form 5 obligations may continue. See Instruction 1(b). Form 5 obligations may continue. 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										.5	
(Print or Type Respor	nses)										
1. Name and Address of Reporting Person <u>*</u> SOLOMON LEWIS			Symbol	er Name and RONIX II		-	5. Relationship of Reporting Person(s) to Issuer				
(Last) (First) (1	Middle)	3. Date of	of Earliest T	ransaction		(Ch	eck all applical	ole)		
C/O LANTRONIX, 15353 BARRANCA PARKWAY			(Month/Day/Year) 11/18/2009				X_ Director 10% Owner Officer (give title Other (specify below) below)				
(Street) 4. If Amendment Filed(Month/Day/ IRVINE, CA 92618				Applicable Line) _X_ Form filed by			y One Reporting	oint/Group Filing(Check One Reporting Person More than One Reporting			
(City) (S	State)	(Zip)	Tah	de I - Non-I	Derivative	Securities A	cquired, Disposed	of. or Benefici	ally Owned		
	nsaction Date th/Day/Year)	2A. Deema Execution any (Month/Da	ed Date, if	3. Transactio Code (Instr. 8) Code V	4. Securit nAcquired Disposed (Instr. 3, -	ies (A) or of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirec (I) (Instr. 4)	7. Nature of Indirect		
Reminder: Report on	a separate line	for each cl	ass of sec	urities benet	ficially ow	ned directly	or indirectly.				
					inforr requi	nation cont red to resp ays a curre	spond to the colle ained in this form 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	Transacti	orDerivative	Expiration Date	Underlying Securitie
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

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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)					
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amou Numb Shares
Stock Option (Right to buy)	\$ 0.51	11/18/2009		А		140,292		11/17/2010 <u>(1)</u>	11/18/2019	Common Stock	140,2

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
SOLOMON LEWIS C/O LANTRONIX 15353 BARRANCA PARKWAY IRVINE, CA 92618	Х							
Signatures								
/s/ Ronald Irick, Attorney-in-fact fo Solomon		11/20/2009						
<u>**</u> Signature of Reporting Person	L		Dat	e				
Explanation of Resp	onse	s:						

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).

Grant to Reporting Person of an option to purchase 140,292 shares of Common Stock under the Issuer's 2000 Stock Plan. The option vests and becomes exercisable as to 70,146 shares on November 17, 2010 and as to 1/24th of the remaining shares each month thereafter

(1) vests and becomes exercisable as to 70,140 shares on revenuer 17, 2010 and as to 72-4n of the remaining shares each month increated so as to be 100% vested approximately three years following the grant date. Notwithstanding the foregoing vesting schedule, vesting may accelerate upon the Company being acquired in a change of control transaction.

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.