## Edgar Filing: Yi John U - Form 4

Yi John U													
Form 4													
April 01, 201	1												
FORM	4										PPROVAL		
	UNITE	D STATES				ND EX( D.C. 20		NGE (	COMMISSION	OMB Number:	3235-0287		
Check thi										Expires:	January 31,		
if no long subject to	- <b>SIAIHWIHNI CIHI HANG</b> HSIN KHNHHICIAI (1)WI							NERSHIP OF	•	2005			
Section 10									Estimated average burden hours per				
Form 4 or	•									response	•		
Form 5 obligation								-	e Act of 1934,				
may conti									f 1935 or Sectio	n			
<i>See</i> Instru 1(b).		30(h)	) of the Inv	vestmei	nt C	Compan	y Act	of 194	40				
(Print or Type R	esponses)												
	ddress of Reportin	ng Person <u>*</u>	2. Issuer	Name a	nd 🛛	Ficker or '	Tradin	g	5. Relationship of	Reporting Per	son(s) to		
Yi John U Symbo				nbol					Issuer				
				RIS INTERNATIONAL INC [IRIS]					(Chec	k all applicable	a)		
(Last)	(First)	(Middle)	3. Date of	Earliest	Tra	nsaction			(Chee	ik un uppheuok	-)		
			(Month/D	onth/Day/Year)					Director 10% Owner				
	TERNATION		03/31/20	1/2011					XOfficer (give below)		e Other (specify below)		
INC., 9158 I	ETON AVENU	UE							· · · · · · · · · · · · · · · · · · ·	VP, Operation	s		
	(Street)		4. If Ame	ndment. l	Date	e Original			6. Individual or Jo	oint/Group Filin	19(Check		
				Amendment, Date Original l(Month/Day/Year)					Applicable Line)				
			,	2	Í				_X_ Form filed by (				
CHATSWO	RTH, CA 913	11							Form filed by N Person	Aore than One Re	eporting		
(City)	(State)	(Zip)	Table	e I - Non	-De	erivative S	Securi	ties Acc	quired, Disposed of	f, or Beneficial	lly Owned		
1.Title of	2. Transaction I			3.					5. Amount of	6. Ownership			
Security (Instr. 3)	(Month/Day/Ye	ar) Execution	on Date, if	Code	ct101	n(A) or Di (D)	sposed	1 of	Securities Beneficially	Form: Direct (D) or	Indirect Beneficial		
(1130.3)		•	/Day/Year)	(Instr. 8) (Instr. 3, 4 and 5)			5)	Owned	Indirect (I)	Ownership			
		`	<b>,</b> ,		ĺ			·	Following	(Instr. 4)	(Instr. 4)		
							(A)		Reported				
							or		Transaction(s) (Instr. 3 and 4)				
a				Code	V	Amount	(D)	Price	(mout 5 and 4)				
Common Stock	03/31/2011			F <u>(1)</u>		217	D	\$ 9.08	47,354	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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transact Code (Instr. 8)	5. ionNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	Date	7. Titl Amou Under Secur (Instr.	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	7 (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Yi John U C/O IRIS INTERNATIONAL, INC. 9158 ETON AVENUE CHATSWORTH, CA 91311			Corp VP, Operations					
Signatures								
/s/ Todd M. Graham, Attorney-in-Fact	04/	01/2011						
**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).
- (1) The shares were retained by the company in payment of the tax associated with the vesting of restricted shares previously granted to the reporting person.

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.