## Edgar Filing: ALLEN JAMES P - Form 4

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Form 4	10										
March 08, 20									OMB AF	PROVAL	
FORM 4 UNITED STATES SECURITIES AND F Washington, D.C.										3235-0287	
Check thi if no long subject to Section 10 Form 4 or Form 5 obligation	F CHANGES IN BENEFICIAL OWNI SECURITIES Section 16(a) of the Securities Exchange A Public Utility Holding Company Act of 1					e Act of 1934,	Number: Expires: Estimated a burden hour response	•			
may conti <i>See</i> Instru 1(b).	inue.			vestment	-						
(Print or Type R	Responses)										
ALLEN JAMES P Symbol GLOB TECH			Symbol GLOBA	BAL DEFENSE INOLOGY & SYSTEMS, INC.				5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director10% Owner			
(Month				te of Earliest Transaction th/Day/Year) 4/2010				XOfficer (give titleOther (specify below) below) EVP, CFO & TREASURER			
				endment, Date Original onth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
MCLEAN, V	VA 22102-5011							Form filed by M Form filed by M Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative S	Securi	ties Acq	uired, Disposed of	, or Beneficiall	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Date 2A. Deemed ar) Execution Date, if any (Month/Day/Year)		3. 4. Securities Acquired Transactior(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or			Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	03/04/2010			Code V P	Amount 15,000	(D) A	Price \$ 12.21 (1)	109,869	Ι	By Trust	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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. Transacti Code (Instr. 8)	5. oriNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			Amou Under Secur	le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu 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	ess Relationships							
	Director	10% Owner	Officer	Other				
ALLEN JAMES P 1501 FARM CREDIT DRIVE SUITE 2300 MCLEAN, VA 22102-5011			EVP, CFO & TREASURER					
Signatures								
/s/ Lisa Broome Attorney-in-Fa Allen	ct for Jan	nes P.	03/05/2010					
<u>**</u> Signature of Reporting Pe	erson		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).

The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$12.15 to \$12.25, inclusive. The reporting person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the Source transactions at prices reported at each comparison undertakes to provide to the Issuer, and security holder of the Issuer, or the staff of the Source transactions at prices reported at each comparison undertakes to provide to the Issuer, and security holder of the Issuer, or the staff of the Source transactions at prices and security holder of the Issuer, or the staff of the Issuer to provide to the Issuer at the number of charge numbered at each comparison to prices.

- Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price within the ranges set forth in this footnote (1) to this Form 4.
- (2) These shares are held by the Allen Family Trust. The reporting person is among the trustees and beneficiaries of the trust.

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.