## Edgar Filing: COTTER MARGARET - Form 4

COTTER MA	ARGARET										
Form 4											
December 29											
FORM			<b>T A N</b> TA		OMMERION		PPROVAL				
	UNITE	DSIALE					GE CO	OMMISSION	OMB	3235-0287	
Check thi	s box		vv as	nington,	D.C. 2054	19			Number:	January 31,	
if no long		FMFNT O	F CHAN	CES IN F	RENEFIC	TAT.	OWN	ERSHIP OF	Expires:	2005	
subject to Section 1				SECUR			0		Estimated a	0	
Form 4 or				bleek					burden hou response		
Form 5	Filed 1	pursuant to	Section 16	(a) of the	e Securitie	s Exc	hange	Act of 1934,	10000100	0.0	
obligation	<sup>18</sup> Section	L .					0	1935 or Section	I		
may conti See Instru	mue.		) of the Inv								
1(b).											
(Print or Type R	Responses)										
1 Name and A	ddress of Report	ing Person *	2 Iaanaa	Nome and	Tielten on Tr	adina		5. Relationship of 1	Reporting Pers	son(s) to	
1. Name and Address of Reporting Person *2. IssuerCOTTER MARGARETSymbol				Name and Ticker or Trading				Issuer			
Symbol					RNATION	JAL I	INC				
			[RDI]					(Check	all applicable	e)	
(Last)	(First)	(Middle)		Earliest Tra	ansaction			X Director	10%	Owner	
()	()	()	(Month/Da		insuction		-	Officer (give t	itle Othe	er (specify	
500 CITAD	EL DRIVE, S	UITE 300	12/27/20	-			I	below)	below)		
	(Street)		4. If Amer	dment, Dat	te Original		(	6. Individual or Joi	int/Group Filir	1g(Check	
				h/Day/Year)	-			Applicable Line)		-8(	
							-	_X_ Form filed by O			
COMMERC	CE, CA 90040						ī	Form filed by M Person	ore than One Re	eporting	
(City)	(State)	(Zip)	Table	I Non D	anivativa Ca			ired, Disposed of,	on Donoficial	ly Owned	
	<b>0 T</b>	-					-			-	
1.Title of Security	2. Transaction (Month/Day/Y		emed ion Date, if	3. Transactio	4. Securitie on(A) or Disp			5. Amount of Securities	6. Ownership	<ol> <li>Nature of Indirect</li> </ol>	
(Instr. 3)	(month/Duy/ 1	any	ion Dute, n	Code	(Instr. 3, 4			Beneficially	Form:	Beneficial	
		(Month	/Day/Year)	(Instr. 8)				Owned	Direct (D)	Ownership	
								Following Reported	or Indirect (I)	(Instr. 4)	
						(A)		Transaction(s)	(Instr. 4)		
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
RDI Class						(2)	11100				
А	12/27/2005			<b>I</b> (1)	193,269	٨	\$	199,207	D		
Nonvoting	12/2/12005			J <u>(1)</u>	195,209	A	7.67	199,207	D		
Stock											

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. Transac Code (Instr. 8)	5. tionNumber of ) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title and A Underlying S (Instr. 3 and	Securities	8. De Se (In
				Code V	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Options $(2)$	\$ 3.75					09/27/2002	09/27/2012	Class A Common Stock	20,000	
Stock Options	\$ 8.32					04/14/1999(3)	04/14/2008	Class B	17,550	
Stock Options	\$ 8.61					04/14/1999(3)	04/14/2008	Class B	17,550	

## **Reporting Owners**

Reporting Owner Name / Addres	s	Relationships						
1	Director	10% Owner	Officer	Other				
COTTER MARGARET 500 CITADEL DRIVE SUITE 300 COMMERCE, CA 90040	Х							
Signatures								
/s/ Margaret Cotter	12/28/2005							

## **Explanation of Responses:**

\* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

Date

- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) Transfer is incident to the dissolution and winding up of Cotter Associates, LLC (a Cotter family entity).
- (2) Right to buy.

<u>\*\*</u>Signature of Reporting Person

(3) Options vest in 4 equal amounts over 4 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.