## Edgar Filing: IGI INC - Form 4

IGI INC

Form 4													
August 10,	2007												
FORM	ЛД									B APPROVAL			
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									N OMB Numbe	ar: 3235-0287			
Check this box if no longer										January 31,			
subject Section Form 4		CHANGES IN BENEFICIAL OWNE SECURITIES					Estima burden respon	ted average hours per se 0.5					
Form 5 obligation may con <i>See</i> Inst 1(b).	ons Section 17	(a) of the	Public U		ding Co	mpar	ny Act	nge Act of 1934 of 1935 or Sect 940					
(Print or Type	Responses)												
GERARDI FRANK Sy				er Name <b>an</b> o C [IG]	<b>d</b> Ticker o	r Trad	ling	5. Relationship of Reporting Person(s) to Issuer					
(Last)	(First) (	Middle)		of Earliest T	ransaction			(C.	neck all appli	k all applicable)			
				(Month/Day/Year) 08/08/2007					Director X_ 10% Owner    Officer (give title  Other (specify below)				
				If Amendment, Date Original led(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person					
JUPITER,	FL 33458							Form filed b Person	y More than O	ne Reporting			
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative	e Secu	rities A	cquired, Disposed	l of, or Bene	ficially Owned			
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Executior any	n Date, if	3. Transactic Code (Instr. 8) Code V	on(A) or Di (D) (Instr. 3,	ispose	d of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
						(- )				By Univest Management			
Common Stock	08/08/2007			Р	800	A	\$ 0.66	1,288,145	I	Inc. Employee Profit Sharing Plan ( <u>1)</u>			
Common Stock	08/09/2007			Р	1,000	Α	\$ 0.66	1,289,145	Ι	By Univest Management Inc. Employee Profit Sharing			

Common Stock

Plan (1)

190,000

D

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

# **Reporting Owners**

<b>Reporting Owner Name / Address</b>		Relationships					
		Director	10% Owner	Officer	Othe		
GERARDI FRANK C/O UNIVEST MAN 149 WEST VILLAGE IUPITER, FL 33458		Х					
Signatures							
/s/ Frank Gerardi	08/10/2007						
<u>**</u> 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) Univest Management Inc. is a Florida Corporation of management consulting located at 149 West Village Way, Jupiter, Florida. Univest Management is privately owned in its entirety by the Reporting Person Frank Gerardi, as its sole shareholder who is the President of

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Univest. Univest Management maintains for the benefit of its employees a deferred compensation plan known as the Univest Management Inc. Employee Profit Sharing Plan. As an employee of Univest, Mr. Gerardi is eligible to participate in such Plan. Mr. Gerardi and his wife Marion Gerardi are the only participants in such Plan, and both are fully vested there under. Mr. Gerardi also serves as the Trustee of such Plan and is responsible for managing and investing the funds and other assets of the Plan.

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.