Edgar Filing: Shelton Adam Lee - Form 4

Shelton Adar	n Lee									
Form 4										
January 21, 2	2009									
FORM	1 /						OMB A	PPROVAL		
	UNITE) STATES			ND EXCHANGE (D.C. 20549	COMMISSION	OMB Number:	3235-0287	7	
Check thi if no long subject to	MENT O	F CHANGES IN BENEFICIAL OWNERSHIP OF				Expires: Estimated a	January 31 2005	·		
0	Section 16. SECURITIES							rs per		
Form 4 or	r						response	•	5	
Form 5	Filed p	ursuant to S	Section 10	6(a) of the	e Securities Exchang	e Act of 1934,				
obligatior may conti <i>See</i> Instru 1(b).	inue. Section 1			•	ing Company Act of Company Act of 194		n			
(Print or Type R	Responses)									
1. Name and A Shelton Ada	g Person <u>*</u>	2. Issuer Name and Ticker or Trading Symbol			5. Relationship of Reporting Person(s) to Issuer					
				CONDUC OLOGIE	CTOR S INC [SCON]	(Check all applicable)				
(Last) (First) (Middle)			3. Date of Earliest Transaction			Director 10% Owner				
			(Month/Day/Year)			X_ Officer (give title Other (specify below) below)				
460 WARD DRIVE			01/20/20)09		VP of Product Mgmt & Marketing				
(Street)			4. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check				
				th/Day/Year)	-	Applicable Line)				
						X Form filed by C				
SANTA						Form filed by M Person	lore man One Re	porting		
BARBARA	, CA 93111-23:	56								
(City)	(State)	(Zip)	Table	e I - Non-D	erivative Securities Acc	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	r) Executionany	med on Date, if Day/Year)	3. Transactic Code (Instr. 8)	4. Securities Acquired on(A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I)			

	(Month/Day/Year)	$(Instr. \delta)$	(Instr. 3, 4	4 and :))	Owned	Indirect (1)
						Following	(Instr. 4)
				()		Reported	
				(A)		Transaction(s)	
				or		(Instr. 3 and 4)	
		Code V	Amount	(D)	Price	(,	
01/20/2009		А	80,549 (1)	А	\$0	95,771	D
	01/20/2009		Code V	Code V Amount 80,549	(A) or Code V Amount (D) 80,549 A	$\begin{array}{c} & & & & & \\ \text{Code V Amount (D) Price} \\ 01/20/2009 & & & & & \\ \end{array}$	Code V Amount (D) Price (A) Following Reported Transaction(s) (Instr. 3 and 4) (D) Price (Instr. 3 and 4)

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)

(Instr. 4)

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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. Transactio Code (Instr. 8)	5. 6. Date Exercisa onNumber Expiration Date of (Month/Day/Yea Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		ate	7. Titl Amou Under Secur (Instr.	int of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Shelton Adam Lee 460 WARD DRIVE SANTA BARBARA, CA 93111-2356			VP of Product Mgmt & Marketing			
Signatures						
By: William J Buchanan For: Adam L Shelton		01/21/20	009			
**Signature of Reporting Person		Date				
Evalenation of Deener						

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) Restricted Stock Award with a two year vesting schedule; cliff vesting 50% after each year.

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.