Edgar Filing: INVERNESS MEDICAL INNOVATIONS INC - Form 4

INVERNESS MEDICAL INNOVATIONS INC

Form 4

November 21, 2007

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number:

Check this box if no longer subject to Section 16.

3235-0287 January 31, Expires:

2005

OMB APPROVAL

Form 4 or Form 5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Estimated average burden hours per response... 0.5

obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * HEMPEL PAUL T

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to Issuer

Symbol **INVERNESS MEDICAL**

(Check all applicable)

(Last)

(First) (Middle) 3. Date of Earliest Transaction

INNOVATIONS INC [IMA]

Director _X__ Officer (give title

10% Owner Other (specify

51 SAWYER ROAD, SUITE 200

(Street)

(Month/Day/Year) 11/20/2007

Sr VP, LD & Legal Affairs

4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check Applicable Line)

Filed(Month/Day/Year)

X Form filed by One Reporting Person Form filed by More than One Reporting

Person

below)

WALTHAM, MA 02453

(City)	(State)	(Zip) Tabl	le I - Non-I	Derivative S	Securi	ties Acqu	ired, Disposed of	, or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed 3. 4. Securities Acquired Execution Date, if any Code (Instr. 3, 4 and 5) (Month/Day/Year) (Instr. 8)			of (D)	5. Amount of Securities Beneficially Owned Following	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common			Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	(Instr. 4)	
Stock	06/30/2007		J <u>(1)</u> V	259	A	32.73	4,924	D	
Common Stock	11/20/2007		M	1,856	A	\$ 15.55	6,780	D	
Common Stock	11/20/2007		M	9,144	A	\$ 15.47	15,924	D	
Common Stock	11/20/2007		S	11,000	D	\$ 59.18	4,924	D	

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

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SEC 1474 (9-02)

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. Transactic Code (Instr. 8)	5. Number op f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option (Right to Buy)	\$ 15.55	11/20/2007		M	1,850	5 08/23/2006	08/22/2012	Common Stock	1,856
Employee Stock Option (Right to Buy)	\$ 15.47	11/20/2007		M	9,144	11/30/2005	11/29/2011	Common Stock	9,144

Reporting Owners

Reporting Owner Name / Address				_	
	Director	10% Owner	Officer		Other

HEMPEL PAUL T 51 SAWYER ROAD, SUITE 200 WALTHAM, MA 02453

Sr VP, LD & Legal Affairs

Relationships

Signatures

/s/ Jay McNamara, Attorney in Fact 11/21/2007

**Signature of Reporting Person Date

Reporting Owners 2

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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) These securities were acquired under the Inverness Medical Innovations, Inc. Employee Stock Purchase Plan. This transaction, which is exempt from Section 16(b) by virtue of Rule 16b-3(c), is being voluntarily reported.
- (2) This derivative security does not have a price.

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.