Edgar Filing: ZALATORIS MARK E - Form 4

| ZALATORIS | MARK E | | | | | | | | | |
|---|---|---|--|------------------------|--|---|--|--|-----------|--|
| Form 4 August 23, 20 | 10 | | | | | | | | | |
| | | | | | | | | OMB A | PPROVAL | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | 3235-0287 | | | |
| if no longe subject to Section 16 Form 4 or Form 5 obligations may contin | Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction See Instruction Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940 | | | | | | burden hou response | Estimated average burden hours per response 0.8 | | |
| (Print or Type Re | esponses) | | | | | | | | | |
| ZALATORIS MARK E Symbol | | | AND REAL ESTATE CORP | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| (Last) 2901 BUTTE | (First) (M: ERFIELD RD | Earliest Transaction ay/Year) 010 | | | | Director 10% Owner XOfficer (give titleOther (specify below) President & CEO | | | | |
| | | | endment, Date Original nth/Day/Year) | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | | |
| OAK BROO | K, IL 60523 | | | | | | | More than One Re | | |
| (City) | (State) (Z | Zip) Table | e I - Non-De | erivative S | Securi | ties Ac | quired, Disposed o | f, or Beneficial | lly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | | 3. Transactio Code (Instr. 8) Code V | Disposed (Instr. 3, | l (A) c l of (D 4 and (A) or |)) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | |
| Common Stock | 08/20/2010 | | Р | 1,000 | A | \$ 7.5 | 78,996 <u>(1)</u> | D | | |

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. Transactic 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 Own Follo Repo Trans (Instr |
|---|---|---|---|--|---|---------------------|--------------------|--|--|---|---|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Addres | s | Relationships | | | | | | | |
|--|------------|---------------|-----------------|-------|--|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | | |
| ZALATORIS MARK E 2901 BUTTERFIELD RD OAK BROOK, IL 60523 | | | President & CEO | | | | | | |
| Signatures | | | | | | | | | |
| /s/Mark E. Zalatoris | 08/23/2010 | | | | | | | | |
| <u>**Signature of</u> 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) Mr. Zalatoris' beneficial ownership includes indirect ownership of 2,100 and 1,700 shares directly owned by the Joanne Zalatoris Trust and the Scott Zalatoris Trust, respectively.

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.