Edgar Filing: CRAIN BOHN H - Form 4

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| Form 4 | | | | | | | | | | | | |
|--|--|--|--|--|---|---------|---|--|---|---|--|--|
| March 03, 20 | | UNITED STATES SECURITIES AND EXCHANGE COMMISSION | | | | | | | | OMB APPROVAL OMB 3235-0287 Number: | | |
| Check thi if no long subject to Section 1 Form 4 o Form 5 obligation may cont <i>See</i> Instru 1(b). | 6. r Filed pu inue. | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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 | | | | | | | Expires: Estimated a burden hour response | | | |
| (Print or Type F | Responses) | | | | | | | | | | | |
| CRAIN BOHN H Symbol | | | er Name and Ticker or Trading | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
| (Last) (First) (Middle) 3. Date o (Month/I 1227 120TH AVENUE N.E. 02/26/2 (Street) 4. If Ame | | | 3. Date of (Month/D | Date of Earliest Transaction onth/Day/Year) /26/2009 | | | | _X_ Director _X_ 10% Owner _X_ Officer (give title Other (specify below) Chief Executive Officer | | | | |
| | | | mendment, Date Original Ionth/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | | | |
| BELLEVU | E, WA 98005 | | | | | | | Form filed by M Person | ore than One Re | porting | | |
| (City) | (State) | (Zip) | Tabl | e I - Non-D | Derivative So | ecuriti | es Acqu | iired, Disposed of | , or Beneficiall | ly Owned | | |
| 1.Title of Security (Instr. 3) | 2. Transaction Dat (Month/Day/Year) |) Execution any | | 3. Transactic Code (Instr. 8) Code V | 4. Securitie on(A) or Disp (Instr. 3, 4 Amount | osed c | of (D) | 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) | | |
| Common Stock | 02/26/2009 | | | P | 240,591 | A | \$ 0.11 | 656,301 <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. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Secur | unt of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr |
|---|---|---|---|--|---|---------------------|--------------------|-------|--|---|--|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|--|---------------|-----------|-------------------------|-------|--|--|--|
| | Director | 10% Owner | Officer | Other | | | |
| CRAIN BOHN H 1227 120TH AVENUE N.E. BELLEVUE, WA 98005 | Х | Х | Chief Executive Officer | | | | |
| Signatures | | | | | | | |
| /s/ Bohn H. 03 Crain 03 | /03/2009 | | | | | | |

<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).
- The 656,301 reported shares are directly owned by Bohn H. Crain in addition to 8,500,000 owned by Radiant Capital Partners, LLC, a
 (1) limited liability company which is solely owned by the reporting person for a total of 9,156,301 shares beneficially owned by Bohn H. Crain.

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.