## Edgar Filing: Stroup John S - Form 4

Stroup John	S									
Form 4 October 06, 2	2010									
								OMB AF	PROVAL	
FORM	UNITED		CURITIES A Washington			NGE C	OMMISSION	OMB Number:	3235-0287	
Check thi if no long subject to Section 1 Form 4 or		GES IN BENEFICIAL OWNERSHIP OF SECURITIES				Expires: January 3 <sup>-</sup> 200 Estimated average burden hours per response 0.				
Form 5 obligation may cont <i>See</i> Instru 1(b).	$\frac{18}{1000}$ Section 17(a	a) of the Publ		ding Com	pany	Act of	e Act of 1934, 1935 or Sectior 0			
(Print or Type F	Responses)									
Stroup John S Symbol			Issuer Name <b>and</b> abol LDEN INC. [		Fradin		5. Relationship of Reporting Person(s) to Issuer			
(Month/D			ate of Earliest Tr onth/Day/Year) 05/2010	/2010			(Check all applicable) <u>X</u> Director <u>10%</u> Owner <u>X</u> Officer (give title <u>Other</u> (specify below) <u>below</u> ) Chief Executive Officer			
(Street) 4. If Amer			Amendment, Da d(Month/Day/Year	endment, Date Original nth/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
ST. LOUIS,	MO 63105						Form filed by M Person			
(City)	(State)	(Zip)	Table I - Non-I	Derivative S	Securi	ties Acqu	uired, Disposed of,	or Beneficial	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Date any	3. Fransactio Code fear) (Instr. 8)	4. Securiti on(A) or Dis (Instr. 3, 4	es Aco posed	quired 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	
Common Stock	10/05/2010		Code V A	Amount 286.53 (1)	(D) A	Price \$ 27.17	336,559.38	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)

## Edgar Filing: Stroup John S - Form 4

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. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of lying	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**

<b>Reporting Owner Name / Address</b>		Relationships						
	Director	10% Owner	Officer	Other				
Stroup John S 7733 FORSYTH BOULEVARD, SUIT ST. LOUIS, MO 63105	TE 800 X		Chief Executive Officer					
Signatures								
/s/ John S. 10/06/201 Stroup	0							

<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).

These shares represent the dividend equivalent that would have been paid on the number of shares of common stock equal to the number of restricted stock units (RSUs) Mr. Stroup received at the time of his employment with the Company, plus prior dividend equivalents(1) accruing on such RSUs. All such dividend equivalents credited to Mr. Stroup shall be added to an thereafter be treated as RSUs under his

employment agreement. As RSUs, these dividend equivalents are subject to vesting, forfeiture and termination in accordance with the terms of his employment agreement.

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.