Edgar Filing: Haberland Jay L - Form 4

| Haberland Jay Form 4 | y L | | | | | | | | | | |
|---|-----------------------------------|---------------------|---------------------------------|--|------------------------|--|--|---|---|---|--|
| May 07, 2010 | | | | | | | | | | | |
| FORM | UNITE | D STATES | | ITIES Al hington, | | | NGE | COMMISSION | | 9PROVAL 3235-0287 | |
| Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations Filed pursuant to Section 16 Section 17(a) of the Public Liti | | | | GES IN BENEFICIAL OWNERSHIP OF SECURITIES 5(a) of the Securities Exchange Act of 1934 ility Holding Company Act of 1935 or Sect | | | | | Expires: January 31, 2005 Estimated average burden hours per response 0.5 | | |
| may contin <i>See</i> Instruct 1(b). | | 30(h) | of the Inv | vestment (| Company | y Act | of 19 | 40 | | | |
| (Print or Type R | esponses) | | | | | | | | | | |
| Haberland Jay L Symbol | | | Name and | | | - | 5. Relationship of Reporting Person(s) to Issuer | | | | |
| | | | | UCOMMUN INC /DE/ [DCO] Date of Earliest Transaction | | | | (Check all applicable) | | | |
| . , | FALCON CI | . , | (Month/Da 05/05/20 | ay/Year) | uisuetion | | | X Director Officer (give below) | | 6 Owner er (specify | |
| | | | | ndment, Dat h/Day/Year) | - | | | 6. Individual or Joint/Group Filing(CheckApplicable Line)_X_ Form filed by One Reporting Person | | | |
| VERO BEA | CH, FL 32962 | | | | | | | Form filed by M Person | More than One Ro | eporting | |
| (City) | (State) | (Zip) | Table | I - Non-De | erivative S | Securi | ties Ac | quired, Disposed o | f, or Beneficial | lly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction I (Month/Day/Ye | ar) Executio any | med on Date, if Day/Year) | 3. Transactio Code (Instr. 8) | Disposed (Instr. 3, | l (A) o l of (D 4 and (A) or | 9) 5) | 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 | 05/05/2010 | | | Code V A | Amount 2,100 | (D) A | Price \$ 0 | 2,100 | 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) | 4. Transactic Code (Instr. 8) | onNumber of | | (Month/Day/Year) ative ities red sed | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | | Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr |
|---|---|---|--|----------------|------|--|--------------------|---|--|--------------------------------|--|
| | | | Code V | 4, and (A) (I | D) [| Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | | Relationships | | | | | | | |
|--|-----------|---------------|-----------|---------|-------|--|--|--|--|
| | | Director | 10% Owner | Officer | Other | | | | |
| Haberland Jay L 2032 GREY FALCON CIRCLE, SW VERO BEACH, FL 32962 | | Х | | | | | | | |
| Signatures | | | | | | | | | |
| /s/ Jay L. Haberland | 05/07/201 | 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).

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.