

ORTHOFIX INTERNATIONAL N V  
 Form 3  
 March 21, 2016

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

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**INITIAL STATEMENT OF 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  
 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *			2. Date of Event Requiring Statement	3. Issuer Name <b>and</b> Ticker or Trading Symbol	
Â GOODWIN ROBERT			(Month/Day/Year)	ORTHOFIX INTERNATIONAL N V [OFIX]	
ALLEN II			03/16/2016		
(Last)	(First)	(Middle)	4. Relationship of Reporting Person(s) to Issuer		5. If Amendment, Date Original Filed(Month/Day/Year)
3451 PLANO PKWY			(Check all applicable)		6. Individual or Joint/Group Filing(Check Applicable Line)
(Street)			___ Director ___ 10% Owner		_X_ Form filed by One Reporting Person
LEWISVILLE,Â TXÂ 75056			_X_ Officer ___ Other (give title below) (specify below)		___ Form filed by More than One Reporting Person
			President Biologics		
(City)	(State)	(Zip)			

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	27,920 <sup>(1)</sup>	D	Â

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

SEC 1473 (7-02)

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**Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
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	Date Exercisable	Expiration Date		Amount or Number of Shares		or Indirect (I) (Instr. 5)	
Stock Option	06/07/2009	06/07/2016	Common Stock	11,687	\$ 39.24	D	Â
Stock Option	06/30/2009	06/30/2016	Common Stock	1,500	\$ 38.11	D	Â
Stock Option	Â (2)	07/16/2023	Common Stock	10,000	\$ 27.97	D	Â
Stock Option	Â (3)	09/26/2023	Common Stock	6,250	\$ 21.78	D	Â
Stock Option	Â (4)	06/30/2024	Common Stock	7,725	\$ 36.25	D	Â
Stock Option	Â (5)	06/30/2025	Common Stock	9,000	\$ 33.12	D	Â

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
GOODWIN ROBERT ALLEN II 3451 PLANO PKWY LEWISVILLE, TX 75056	Â	Â	Â President Biologics	Â

## Signatures

/s/ Jeffrey M. Schumm, by power of attorney 03/21/2016

\_\_Signature of Reporting Person

Date

## Explanation of Responses:

- \* If the form is filed by more than one reporting person, see Instruction 5(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) Represents (i) 4,839 shares directly owned; (ii) 11,931 time-based restricted stock awards in which 4,394 shares, 5,394 shares, 1,393 shares and 750 shares will vest in the remainder of 2016, 2017, 2018 and 2019 respectively; and (iii) 11,150 performance-based restricted stock awards of 5,150 shares and 6,000 shares granted under the 2014 Performance Vesting Restricted Stock Grant Agreement and the 2015 Performance Vesting Restricted Stock and Performance Share Unit Grant Agreement, respectively.
  - (2) These stock options vest in 25% increments on the first, second, third and fourth anniversaries of the grant date, July 16, 2013.
  - (3) These stock options vest in 50% increments on September 26, 2016 and 2017.
  - (4) These stock options vest in 25% increments on the first, second, third and fourth anniversaries of the grant date, June 30, 2014.
  - (5) These stock options vest in 25% increments on the first, second, third and fourth anniversaries of the grant date, June 30, 2015.

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.