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FOLLIS DAN Form 4 February 14, 2										
FORM	Λ							-	APPROVAL	
	UNITED STA	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						OMB Number:	3235-0287	
Check this if no longe	ar .	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 20(b) of the Investment Company Act of 1940							January 31,	
subject to Section 16 Form 4 or Form 5 obligations may contin <i>See</i> Instruct 1(b).	Filed pursuan Section 17(a) of the arrows of the section 17 and the se								2005 d average burs per 0.5	
(Print or Type Re	esponses)									
1. Name and Ad FOLLIS DAI	Symbol	2. Issuer Name and Ticker or Trading Symbol SOMANETICS CORP [SMTS]				5. Relationship of Reporting Person(s) to Issuer				
(Last)	e) 3. Date of E	Earliest Trai	nsaction	-		(Check all applicable)				
C/O SOMAN CORPORAT MAPLE ROA		(Month/Day/Year) 06/26/1995				X_ Director 10% Owner Officer (give title Other (specify below) below)				
(Street) 4. If Amend Filed(Month			ndment, Date Original th/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
TROY, MI 4	8083						Person	More than One	Reporting	
(City)	(State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Benef						of, or Benefic	ally Owned		
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, any (Month/Day/Year)		Code (Instr. 8)	4. Securit on(A) or Dis (D) (Instr. 3, 4 Amount	sposed	of	SecuritiesOwnershipIBeneficiallyForm:EOwnedDirect (D)O		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common	06/26/1995		Р	60,000		<u>(1)</u>	148,203 <u>(1)</u>	Ι	By partnership	
Shares	00/20/1993		•	00,000	11		110,203 <u> </u>	1	(<u>1</u>)	
Convertible Preferred Shares (2)							88,203 <u>(2)</u>	Ι	By partnership	
Common Shares							40,967	D		
Convertible Preferred							15,167 <u>(2)</u>	D		

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Shares (2)

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

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transact 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 rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur 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 / A	Relationships						
	Director	10% Owner	Officer	Other			
FOLLIS DANIEL S C/O SOMANETICS CORPO 1653 EAST MAPLE ROAD TROY, MI 48083		X					
Signatures							
Daniel S. Follis	02/14/2006						
<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 reported securities are held by The Infinity Fund, a limited partnership in which the reporting person is a 50 percent general partner and a limited partner. On June 25, 1995, the partnership acquired 60,000 Somanetics Corporation Common Shares (subsequently reduced

(1) as a result of a 1-for-10 reverse stock split effective 4/10/97) from another party in exchange for 1,515.16 units of limited partnerhip, valued at \$53,686.91. The reporting person disclaims beneficial ownership of these securities, except to the extent of his pecuniary interest therein.

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(2) All Convertible Preferred Shares were redeemed effective 2/28/96 for \$0.01 per share.

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.