#### Edgar Filing: STEBBING ROGER F - Form 4

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Form 4	KUGER F										
January 06,	2009										
FORM	14							-	PPROVAL		
	UNITED	STATES S	ECURITIE Washing				E COMMISSIO	N OMB Number:	3235-02	-	
Check this box if no longer								Expires:	January 3	31, )05	
subject to STATEMENT OF CHANGES IN Section 16. SECU Form 4 or					ITIES		Estimated burden hoi response	average urs per	0.5		
Form 5 obligatio may con <i>See</i> Instr 1(b).	tinue. Section 17	(a) of the Pu		Hold	ing Cor	npany Act	nge Act of 1934, c of 1935 or Secti 1940				
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> STEBBING ROGER F			2. Issuer Name <b>and</b> Ticker or Trading Symbol ATRION CORP [ATRI]				5. Relationship of Reporting Person(s) to Issuer				
							(Check all applicable)				
(N			3. Date of Earliest Transaction (Month/Day/Year) 01/02/2009			X_ Director 10% Owner Officer (give title Other (specify below) below)					
(Street)			4. If Amendment, Date Original Filed(Month/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 Person					
(City)	(State)	(Zip)	Table I - N	on-D	erivative	Securities A	Acquired, Disposed	of, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Da any (Month/Day/	Code	action. I	4. Securit Acquired Disposed (Instr. 3, 4	(A) or of (D)	Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
			Code	V.	Amount	(D) Price	(Instr. 3 and 4)				
Reminder: Rep	port on a separate line	e for each class	of securities b	penefi	-	-	-				
					inforn requii	nation cont red to resp ays a curre	spond to the colle tained in this forn ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)		

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount of	8. P
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof	Expiration Date	Underlying Securities	Der
Security	or Exercise		any	Code	Derivative	(Month/Day/Year)	(Instr. 3 and 4)	Sec
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Securities			(Ins

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	Derivative Security		(A) or Dispos of (D)	Disposed of (D) (Instr. 3, 4,							
			Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Units (1)	\$ 0 <u>(1)</u>	01/02/2009	А		5.06		01/02/2009(2)	(3)	Common Shares	5.06	\$

### **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships						
	Director	10% Owner	Officer	Other			
STEBBING ROGER F							
	Х						

## Signatures

Jeffery Strickland, Attorney-in-fact 01/06/2009 <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).
- (1) Dividend Equivalents credited as Stock Units under the Atrion Corporation Deferred Compensation Plan for Non-Employee Directors, as amended and restated.
- (2) In January 2010, these Stock Units will convert to shares of common stock, without further consideration, on a one for one basis.
- (3) Stock Units will not expire.
- (4) Does not include 10,000 stock options for the purchase of Atrion Corporation Common Stock held by the reporting person, which were previously reported.
- (5) The reporting person also directly owns 18,800 shares of Atrion Corporation Common Stock.

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.