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MPHASE TECHNOLOGIES INC

Table II herein.

Form 4 February 07, 2001

FORM 4		UNITED STATES SECURITIES AND EXCHANGE COMMISSION WASHINGTON, D.C. 20549							
/ / CHECK THIS LONGER SUB- SECTION 16. FORM 5 OBL- CONTINUE. INSTRUCTION (Print or Type	JECT TO . FORM 4 OR FIGATIONS MAY SEE N 1(b). Responses)	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Filed pursuant to Section 16(a) of the Securities Exchange Act of Section 17(a) of the Public Utility Holding Company Act of 1935 Section 30(f) of the Investment Company Act of 1940							
1. Name and Add	dress of Reportin	ng Person*	2.	Issuer	Name A	ND Ticker	or Tradi	ng Symbol	6. 1
Biderman	Abraham					logies, I			
	(First)		3.	IRS or Number	or Social Security per of Reporting con (Voluntary)		4. Statement for		
Brooklyn, NY	(Street)						5. If A	mendment, of Original th/Year)	
(City)		-						TITIES ACQUIE	
1. Title of Security (Instr. 3)		2. Trans- action	3	3. Trans- 4. Security or Disposer (Instr. 8)			ties Acqu posed of . 3, 4 an	osed of (D) 3, 4 and 5)	
							(A) c	r Price	Moi (Ii and
Common Stock		1/31/01		P		5,000	А	\$2.00(1)	5
		of the Common S							

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Reminder: Report on a separate line for each class of securities beneficially owned directly or i * If the form is filed by more than one reporting person, SEE Instruction 4(b)(v).

FORM 4 (CONTINUED) TABLE			S ACQUIRED, DISP ANTS, OPTIONS, C			
1. Title of Derivative Security (Instr. 3)	2. Conversion or	3. Trans- action Date (Month/ Day/ Year)		5. Number of ative Secu quired (A) posed of (
			Code V	(A)		
Common Stock Warrants (right to bu	y) \$3.00	1/31/01		5,000		
7. Title and Amount of Under-lying Securities (Instr. 3 and 4)	8. Price 9 of Deriv- ative Secur- ity (Instr.	O. Number of Deriv- ative Securi- ties Bene- ficially	10. Owner- ship Form of De- rivative Secu- rity:	11. Nature of In- direct Bene- ficial Own- ership		

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	Title	Amount or Number of Shares	5)	Owned at End of Month (Instr. 4)	Direct (D) or Indi- rect (I) (Instr. 4)	(Instr. 4)
Common	Stock	5,000	(1)	5,000	D	
Explan	ation of Respo	nses:				

By: /s/ Abraham

**Signature c

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.

^{**}Intentional misstatements or omissions of facts constitute
Federal Criminal Violations. SEE 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).