## Edgar Filing: Armbruster Peter R. - Form 4

Armbruster F	Peter R.										
Form 4											
March 03, 20	)11										
FORM	1 4									PPROVAL	
	UNIT	ED STATES		ITIES A hington,			NGE (	COMMISSION	OMB Number:	3235-0287	
Check thi				8,					Expires:	January 31,	
if no longer subject to STATEMENT OF CHA				GES IN I	BENEFI	CIA	LOW	<b>NERSHIP OF</b>	2005		
Section 16.				SECUR			Estimated average burden hours per				
Form 4 of Form 5	Form 4 or Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 193						A ( C1024	response 0.5			
obligation	10	•					-				
may conti	inue. Section			-	-			f 1935 or Sectio	n		
See Instru	iction	50(ff)	of the Inv	vestment	Company	y Aci	. 01 19	40			
1(b).											
(Print or Type R	Responses)										
1. Name and Address of Reporting Person * Armbruster Peter R.2. Issuer Name and Ticker or Trading Symbol5. Relationsh Issuer							-	of Reporting Person(s) to			
	-	iner Trans TS]	sportation	n Sys	tems,	(Check all applicable)					
(Last)	(First)	(Middle)	3. Date of Earliest Transaction Director (Month/Day/Year) Z Officer (give					e title Other (specify			
4900 S. PEN	(Month/Day/Year) 03/01/2011					below) below) VP-Finance, CFO, Tr, & Sec.					
AVENUE			05/01/20	/11				vP-Final	nce, CFO, Ir, &	e Sec.	
	(Street)		1 If Amor	dmant Dat	o Original			6 Individual on I	aint/Crown Fili	n c/Chl-	
· · ·				ndment, Dat th/Day/Year)	-			6. Individual or Joint/Group Filing(Check Applicable Line)			
				ul/Day/1Cal)				_X_Form filed by One Reporting Person			
CUDAHY,	WI 53110							Form filed by Person	More than One Re	eporting	
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficial	lly Owned	
1.Title of	2. Transaction	Date 2A. Dee	emed	3.	4. Securi	ties		5. Amount of	6. Ownership	7. Nature of	
Security		Year) Executi	on Date, if TransactionAcquired (A) or Code Disposed of (D)					Securities	Form: Direct		
(Instr. 3)		any						Beneficially	(D) or	Beneficial	
		(Month	/Day/Year) (Instr. 8) (Instr. 3, 4 and 5)				5)	Owned Following		Ownership (Instr. 4)	
								Reported	(11150.4)	(11150.4)	
						(A)		Transaction(s)			
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common					6,447				_		
Stock	03/01/2011			А	<u>(1)</u>	А	\$0	54,974	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)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (Instr. 8	of 8) Do So Au (A D) of (Iu	umber		Date	Amou Unde Secur	le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code	V (A	A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## Edgar Filing: Armbruster Peter R. - Form 4

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
FB	Director	10% Owner	Officer	Other				
Armbruster Peter R. 4900 S. PENNSYLVANIA AVENUE CUDAHY, WI 53110			VP-Finance, CFO, Tr, & Sec.					
Signatures								

Peter R. Armbruster 03/03/2011

\*\*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).

Reflects the grant of restricted stock units. Each restricted stock unit represents the contingent right to receive one share of the Issuer's (1) common stock. 25% of the restricted stock units will vest, and the underlying shares of common stock will be delivered, on each anniversary of the grant date beginning on March 1, 2012.

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.