Edgar Filing: VALENTINE KEVIN - Form 4

VALENTIN	E KEVIN											
Form 4	010											
January 13, 2												
FORM	14 UNIT	гр статғ	S SECUP	TTIFS A	ND FY	~ Н А	NCF (COMMISSION	-	PPROVAL		
	UNIII	ED STATE			, D.C. 20		NGE	201011011551014	OMB Number:	3235-0287		
Check the	is box		vv as	Sinington	, D.C. 20	549			Expires:	January 31,		
-	if no longer STATEMENT OF CHANG				GES IN BENEFICIAL OWNERSHIP OF					2005		
subject to Section 1)				ECURITIES					Estimated average		
Form 4 o				51001					burden hours per response 0.5			
Form 5	Filed	pursuant to	Section 1	6(a) of th	e Securit	ies E	xchang	ge Act of 1934,	100001100	0.0		
obligation	ns Section	^					-	f 1935 or Sectio	n			
may cont See Instru	mue.) of the In	-	-	~ -						
1(b).					-							
(Print or Type I	Responses)											
1. Name and A	ddress of Repor	ting Person *	2 Issuer	· Name and	d Ticker or	Tradir	na	5. Relationship of	Reporting Per	son(s) to		
VALENTINE KEVIN Symbol				Iona India India India				Issuer				
				L International Group, Inc. [TAL]								
(Last)	(First)	(Middle)		Earliest T	-		[]	(Chec	k all applicable	e)		
(Last)	(1130)	(winduic)	(Month/D		Tansaction			Director	10%	b Owner		
100 MANH	ATTANVILI	LE ROAD	01/11/2	•				Officer (give	e title Oth	er (specify		
			01/11/2					below)	below) r Vice Presider	ht		
	(6,)		4 70 4									
				f Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
			Filed(Mon	th/Day/Yea	r)			Applicable Line) _X_ Form filed by (One Reporting Pe	erson		
PURCHASI	E, NY 10577							Form filed by M	Iore than One Re			
								Person				
(City)	(State)	(Zip)	Tabl	e I - Non-l	Derivative	Securi	ities Aco	quired, Disposed of	f, or Beneficial	lly Owned		
1.Title of	2. Transaction	Date 2A. De	emed	3.	4. Securi	ties A	cquired	5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Y		on Date, if Transaction(A) or Disposed of				d of	Securities	Form: Direct			
(Instr. 3)		any (Month	/Day/Year)	Code (Instr. 8)				-	(D) or Indirect (I)	Beneficial Ownership		
		(Wonth	/Day/Ical)	(1130.0)	$(1150.5, \pm a10.5)$		5)	Following	(Instr. 4)	(Instr. 4)		
						(A)		Reported				
						or		Transaction(s) (Instr. 3 and 4)				
				Code V	Amount	(D)	Price	(Insu: 5 and 4)				
Common	01/11/2012			S	2,500	D	\$	29,096	D			
Stock					(1)		32.5	,				

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)	4. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu 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 / Address	Relationships							
	Director	10% Owner	Officer	Other				
VALENTINE KEVIN 100 MANHATTANVILLE ROAD PURCHASE, NY 10577			Senior Vice President					
Signatures								
Marc Pearlin, attorney in fact for Ke Valentine	evin	01	/13/2012					
**Signature of Reporting Person			Date					
Explanation of Resp	onses	S:						

- * 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) Shares were sold pursuant to a 10(b) (5) plan dated August 29,2011

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.