HON PETER Form 5 May 15, 2009

### FORM 5

**OMB APPROVAL** 

**OMB** Number:

3235-0362

Expires:

January 31, 2005

1.0

Estimated average

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burden hours per

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

See Instruction Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, 1(b). Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

Reported Form 4

Check this box if

no longer subject

to Section 16.

5 obligations

may continue.

Form 4 or Form

30(h) of the Investment Company Act of 1940

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Transactions Reported

(Last)

1. Name and Address of Reporting Person \* HON PETER

(First)

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to

Issuer

below)

SINGING MACHINE CO INC

(Check all applicable)

below)

[SMD]

(Middle)

3. Statement for Issuer's Fiscal Year Ended

(Month/Day/Year)

\_X\_ Director Officer (give title

10% Owner \_\_ Other (specify

03/31/2009

C/O THE SINGING MACHINE COMPANY, INC., Â 6601 LYONS ROAD, BUILDING A-7

> (Street) 4. If Amendment, Date Original

> > Filed(Month/Day/Year)

6. Individual or Joint/Group Reporting

(check applicable line)

COCONUT CREEK, Â FLÂ 33073

\_X\_ Form Filed by One Reporting Person Form Filed by More than One Reporting

Person

(City)	(State) (	Zip) Table	e I - Non-Deri	vative Sec	curitie	s Acqui	red, Disposed o	f, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned at end of Issuer's	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Amount	(A) or (D)	Price	Fiscal Year (Instr. 3 and 4)		
Common Stock	06/30/2007	Â	J4	574	A	\$ 0.93	574	D	Â
Common Stock (1)	10/08/2008	Â	J4	5,556	A	\$ 0.45	6,130	D	Â

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.

**SEC 2270** (9-02)

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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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
					(A)	(D)	Date Exercisable	Expiration Date	Title	Amoun or Numbe of Shar
Stock Options	\$ 0.45	03/31/2008	Â	J4	20,000	Â	03/30/2009	03/31/2018	Common Stock	20,00
Stock Options	\$ 0.11	03/31/2009	Â	J4	20,000	Â	03/30/2010	03/31/2019	Common Stock	20,00

## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Othe		
HON PETER						
C/O THE SINGING MACHINE COMPANY, INC.	ÂΧ	Â	Â	Â		
6601 LYONS ROAD, BUILDING A-7	ΑΛ	A	A	А		
COCONUT CREEK, FL 33073						

#### **Signatures**

/s/ Peter Hon 05/15/2009

\*\*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) All stock grants were awarded as part of the Company's annual director compensation plan.
- (2) All options were granted as part of the Company's annual director compensation plan.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.

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