Edgar Filing: CSP INC /MA/ - Form 4

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Form 4											
	nuary 25, 2007							OMB APPROVAL			
	Washington, D.C. 20549							OMB Number:	3235-0287		
Check thi if no long subject to Section 10 Form 4 or	6. STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES							Expires: Estimated a burden hou response	rs per		
Form 5 obligatior may conti <i>See</i> Instru 1(b).	e Act of 1934, f 1935 or Sectio 40	n									
(Print or Type R	esponses)										
1. Name and A JAMES C S	2. Issuer Name and Ticker or Trading Symbol CSP INC /MA/ [CSPI]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year)				X Director	Director 10% Owner			
GROUP LONG DISTANCE INC, 1451 W CYPRESS CREEK RD STE 200			01/24/2007					Officer (give below)	titleOthe	er (specify	
	(Street) 4. If Amer Filed(Mont				-			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
FT LAUDE	RDALE, FL 3	3309						Form filed by M Person	Aore than One Re	eporting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative S	Securi	ties Acc	quired, Disposed of	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction I (Month/Day/Ye	ear) Executio any	on Date, if	3. Transactic Code (Instr. 8) Code V	on(A) or Di (D)	ispose	d of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial	
Common Stock	01/24/2007			M <u>(1)</u>	1,000 (1)	А	\$ 6.14	7,100	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)

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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. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title and Amount of Underlying Securities (Instr. 3 and 4)		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 / AddressRelationshipDirector10% OwnerOfficerOtherJAMES C SHELTON
GROUP LONG DISTANCE INC
1451 W CYPRESS CREEK RD STE 200
FT LAUDERDALE, FL 33309XXXSignatures
James C Shelton01/24/2007XXX**Signature of
Reporting PersonDateDateVV

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) Exercise of Stock Options

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.