FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours per response:	0.5								

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

								` '				' '												
1. Name and Address of Reporting Person* <u>CHOLMONDELEY PAULA H</u>							2. Issuer Name and Ticker or Trading Symbol ULTRALIFE CORP [ULBI]											plicable)		Person(s) to Issuer 10% Owner Other (specify below)				
(Last) ULTRAL	ast) (First) (Middle) LTRALIFE CORPORATION						3. Date of Earliest Transaction (Month/Day/Year) 02/15/2010																	
2000 TECHNOLOGY PARKWAY							4. If Amendment, Date of Original Filed (Month/Day/Year)											6. Individual or Joint/Group Filing (Check Applicable						
(Street) NEWARK NY 14513																X Form filed by One Reporting Person Form filed by More than One Reporting Person								
(City)	(St		(Zip)																					
		Tab	le I - No	n-Deriv	ative	Se	ecuri	ities	Acq	uired,	, Dis	posed o	f, o	r Bei	nefic	ially Ov	ned	l .						
Dat					2. Transaction Date (Month/Day/Year)			2A. Deemed Execution Date, if any (Month/Day/Year)			ction Instr.	4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				nd Sec Ben Owr			6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
						Code	v	Amount		(A) or (D)	Price	Tran	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)							
Common Stock, \$.10 par value 02/15/2							010			A		2,529		A		0	2,529		I		See Footnote ⁽¹⁾			
Common											10,138		I		See Footnote ⁽²⁾									
Common											6,135				See Footnote ⁽³⁾									
		Ta										sed of, onvertib					ed							
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution Date, if any		4. Transaction Code (Instr. 8)		on of cr. Do Se A (A Di of (Ir	. Num f ecivat ecurit cquire A) or ispos f (D) nstr. 3 nd 5)	ive ies ed	6. Date E Expiratio (Month/I	on Dat		7. Title and Amount of Securities Underlying Derivative Security (Instrand 4)		;	8. Price Derivati Security (Instr. 5)	ve d S B C F R	Number lerivative Securities Seneficially Owned Following Reported Transaction Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)			
					Code	code V		(A) (D)		Date Exercisa		Expiration Date	OI Ni O1		ımber									

${\bf Explanation\ of\ Responses:}$

- $1.\ These\ shares\ are\ held\ by\ Paula\ H.\ J.\ Cholmondeley\ as\ Trustee\ of\ the\ Paula\ J.\ Cholmondeley\ Trust\ u/a\ dated\ 8/1/94.$
- 2. These shares are held by Paula H. J. Cholmondeley as Trustee for The Sorrel Group, LLC Defined Benefit Plan.
- 3. These shares are held by Paula H. J. Cholmondeley as Trustee of The Sorrel Group 401(K) FBO Paula H. J. Cholmondeley.

Remarks:

Paula H.J. Cholmondeley

02/17/2010

actly

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.