#### **IMMUNOMEDICS INC**

Form 4 July 06, 2017

### FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB** Number:

3235-0287

Expires:

January 31, 2005

0.5

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**OMB APPROVAL** 

response...

if no longer subject to Section 16. Form 4 or

Check this box

Form 5 obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* Aghazadeh Behzad

2. Issuer Name and Ticker or Trading Symbol

IMMUNOMEDICS INC [IMMU]

5. Relationship of Reporting Person(s) to

Issuer

(Last)

(First)

(Middle)

3. Date of Earliest Transaction

X\_ Director 10% Owner \_X\_ Other (specify

C/O VENBIO SELECT ADVISOR LLC, 120 W. 45TH STREET, 28TH **FLOOR** 

07/03/2017

(Month/Day/Year)

Officer (give title below) below) See Remarks

(Check all applicable)

(Street)

4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check

Filed(Month/Day/Year) Applicable Line)

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

NEW YORK, NY 10036

(State) (Zip) (City)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)

2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if

(Month/Day/Year)

4. Securities 3. TransactionAcquired (A) or Code Disposed of (D) (Instr. 3, 4 and 5) (Instr. 8)

5. Amount of Securities Beneficially Owned Following

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial (I) Ownership (Instr. 4) (Instr. 4)

Reported (A) Transaction(s) or (Instr. 3 and 4) Code V Amount (D) Price

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 1474 (9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Conversion 3. Transaction Date 3A. Deemed (Month/Day/Year) Execution Date, if

5. Number of TransactionDerivative

6. Date Exercisable and **Expiration Date** 

7. Title and Amount of Underlying Securities

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)		Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		(Month/Day/Year)		(Instr. 3 and 4)	
				Code V	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Options (right to buy)	\$ 9.02	07/03/2017		A		22,500		07/03/2018	07/03/2024	Common Stock, par value \$0.01 per share	22,500

### **Reporting Owners**

Reporting Owner Name / Address	Relationships						
Reporting Owner Function	Director	10% Owner	Officer	Other			
Aghazadeh Behzad C/O VENBIO SELECT ADVISOR LLC 120 W. 45TH STREET, 28TH FLOOR NEW YORK, NY 10036	X			See Remarks			
venBio Select Advisor LLC 120 WEST 45TH STREET SUITE 2802 NEW YORK, NY 10036	X						

## **Signatures**

venBio Select Advisor LLC By: /s/ Scott Epstein, its Chief Financial Officer & Chief Compliance Officer				
	**Signature of Reporting Person	Date		
/s/ Behzad Aghazadeh		07/06/2017		
	**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).

#### **Remarks:**

The Investment Manager may be deemed to be a director by deputization of the Issuer by virtue of the fact that Dr. Agahazade 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.

Reporting Owners 2