## Edgar Filing: IMMUNOMEDICS INC - Form 4

IMMUNON Form 4	MEDICS INC									
October 25	, 2004									
	ЛЛ								PPROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								N OMB Number:	3235-02	287
Check t if no los subject Section Form 4 Form 5 obligati may co <i>See</i> Insi	nger to 16. or Filed put tons ntinue.		Section Public U	<b>SECUI</b> 16(a) of th	Estimated burden hou response	Estimated average burden hours per response 0.5				
1(b).	luction	~ /			1	2				
(Print or Type	e Responses)									
1. Name and Address of Reporting Person <u>*</u> JAFFE MARVIN			2. Issuer Name and Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer			
		IMMUNOMEDICS INC [IMMU]				(Check all applicable)				
(Last) (First) (Middle) C/O IMMUNOMEDICS, INC., 300 AMERICAN ROAD			<ul><li>3. Date of Earliest Transaction</li><li>(Month/Day/Year)</li><li>07/01/2004</li></ul>				Officer (give title Other (specify below) below)			
		4. If Amendment, Date Original Filed(Month/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person					
MORRIS I	PLAINS, NJ 0795	0					Form filed by Person	More than One R	eporting	
(City)	(State)	(Zip)	Tab	ole I - Non-l	Derivative	Securities A	Acquired, Disposed	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemo Execution any (Month/Da	Date, if	ate, if TransactionAcquired (A) or Code Disposed of (D)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature o Indirect Beneficial Ownership (Instr. 4)		
Reminder: Re	eport on a separate line	e for each cla	ass of sec							
					Perso inforr requi	ons who res nation cont red to resp	spond to the colle tained in this forn ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)	

number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of	8
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	orDerivative	Expiration Date	Underlying Securities	D
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	S

## Edgar Filing: IMMUNOMEDICS INC - Form 4

(Instr. 3)	Price of Derivative Security	(Mon	th/Day/Year)	(Instr. 8)	Acquired or Dispos (D) (Instr. 3, 4 and 5)	ed of				(
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Options (right to buy)	\$ 4.95	07/01/2004		А	10,000		<u>(1)</u>	07/01/2014	Common Stock, par value \$0.01 per share	10,000

## **Reporting Owners**

Reporting Owner Name / Addre	SS	Relationships							
	Director	10% Owner	Officer	Other					
JAFFE MARVIN C/O IMMUNOMEDICS, IN 300 AMERICAN ROAD MORRIS PLAINS, NJ 07950	Х								
Signatures									
/s/ Marvin Jaffe	10/25/2004								
**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) The stock options were granted pursuant to the Company's Stock Option Plan and vest over four years at a rate of 25% per year.

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.

(