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COLEMAN	MORTON										
Form 4	2004										
October 26,	ЛЛ		GEOU						PPROVAL		
Washington, D.C. 20549									3235-0287		
Check ti if no lor subject Section Form 4	NGES IN SECUI		Estimated burden hou	Expires: January 31 2005 Estimated average burden hours per response 0.5							
Form 5 obligations may continue. See Instruction 1(b). 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											
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> COLEMAN MORTON			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			3. Date of Earliest Transaction (Month/Day/Year)07/01/2004				X_ Director 10% Owner Officer (give title Other (specify below) below)				
(Street)			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)	Tat	ole I - Non-l	Derivative	Securities A	cquired, Disposed	of, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deem Execution any (Month/Da	Date, if	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 of Indirect Beneficial Ownership (Instr. 4)			
				Code V	Amount	(D) Price	(msu. 5 and 4)				
Reminder: Re	port on a separate lin	e for each cl	ass of sec	urities bene	Perso inforr requi	ons who res nation cont red to respo	or indirectly. spond to the colle tained in this forr ond unless the fo ntly valid OMB co	n are not orm	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	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	Transacti	orDerivative	Expiration Date	Underlying Securities	D
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	S

number.

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(Instr. 3)	Price of Derivative Security	(Month/Da	y/Year) (Instr	r. 8)	Acquired or Dispos (D) (Instr. 3, 4 and 5)	ed of				(
			Code	e 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 / Addres	s	Relationships								
	Director	10% Owner	Officer	Other						
COLEMAN MORTON C/O IMMUNOMEDICS, INC 300 AMERICAN ROAD MORRIS PLAINS, NJ 07950	Х									
Signatures										
/s/ Morton 1 Coleman	0/25/2004									

<u>**</u>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.

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