ENDOCYTE INC Form 3 November 08, 2013 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB APPROVAL FORM 3 Washington, D.C. 20549 OMB Number:

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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> GODDARD COLIN			2. Date of Event Requiring Statement (Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol ENDOCYTE INC [ECYT]					
(Last)	(First)	(Middle)	11/07/2013	4. Relationship of Reporting Person(s) to Issuer (Check all applicable)			5. If Amendment, Date Original Filed(Month/Day/Year)		
C/O ENDOO KENT AVE							,(
WEST	(Street)	7004		XDirecto Officer (give title belo	Other		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One		
LAFAYETT	E,A INA 4						Reporting Person		
(City)	(State)	(Zip)	Table I - N	Non-Deriva	tive Securiti	ies Be	neficially Owned		
1.Title of Secur (Instr. 4)	ity		2. Amount o Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nat Owne (Instr.	1		
Reminder: Report on a separate line for each class of securities beneficial owned directly or indirectly.					SEC 1473 (7-02	2)			
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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivative Security	Security: Direct (D) or Indirect (I)	

3235-0104

January 31,

2005

0.5

Expires:

response...

Estimated average burden hours per

(Instr. 5)

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
GODDARD COLIN C/O ENDOCYTE INC 3000 KENT AVE, SUITE A1-100 WEST LAFAYETTE, IN 47906	ÂX	Â	Â	Â			
Signatures							
/s/ Beth A. Taylor, Attorney-in-fact f Goddard	11/08/2013						
**Signature of Reporting Person	Date						
Explanation of Responses:							
No securities are beneficially owned							

* If the form is filed by more than one reporting person, *see* Instruction 5(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. 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.