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ENDOCYTI Form 4											
February 08,	ПЛ									PPROVAL	
	RITIES A shington,			NGE (COMMISSION	OMB Number:	3235-0287				
Check this box if no longer subject to Section 16. Form 4 or Form 5 Filed pursuant to Section 16				SECUR	ITIES				Expires: Estimated burden hou response	urs per	
obligatio may cont <i>See</i> Instr 1(b).	tinue. Section 1			tility Hold vestment	•	· ·		f 1935 or Sectio 40	n		
(Print or Type]	Responses)										
Sherman Michael A. Symbol				Issuer Name and Ticker or Trading nbol DOCYTE INC [ECYT]				5. Relationship of Reporting Person(s) to Issuer			
				of Earliest Transaction /Day/Year) 2016				(Check all applicable) <u>X</u> Officer (give title 10% Owner (COO and CFO			
WEST LAF	(Street) FAYETTE, IN 4	-7906		endment, Da nth/Day/Year	-			6. Individual or Jo Applicable Line) _X_ Form filed by M Form filed by M Person	One Reporting P	erson	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative S	Securi	ties Acc	uired, Disposed o	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	Title of ecurity2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if			3. 4. Securities Acquired Transactior(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or				5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common	02/04/2016			Code V A	Amount 14,375	(D) A	Price \$ 0	(Instr. 3 and 4) 127,437 (2)	D		
Stock Common Stock	02/04/2016			F	$(1) \\ 1,771 \\ (3) \\ (3)$	D	\$ 3.18	125,666	D		
Common Stock	02/06/2016			F	694 <u>(4)</u>	D	\$ 3.02	124,972	D		
Common Stock								19,919	I	By Sherman Investors, LLC	

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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.

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

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (right to buy)	\$ 3.18	02/04/2016		А	86,250	(5)	02/04/2026	Common Stock	86,250

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Sherman Michael A. 3000 KENT AVE, STE A1-100 WEST LAFAYETTE, IN 47906			COO and CFO			
Signatures						

/s/ Michael A. Sherman **Signature of Reporting 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) Represents restricted stock units that will vest and be paid 1/4 annually over a period of 4 years beginning on February 4, 2017, in the form of one share of common stock for each restricted stock unit.
- (2) Includes 861 and 1292 shares acquired under the Endocyte, Inc. 2010 Employee Stock Purchase Plan on June 15, 2015 and December 15, 2015, respectively.
- (3) Represents shares withheld to satisfy tax withholding obligations associated with the settlement of 4,792 restricted stock units in the form of Company common stock on a one-for-one basis on February 4, 2016.

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(4) Represents shares withheld to satisfy tax withholding obligations associated with the settlement of 1,875 restricted stock units in the form of Company common stock on a one-for-one basis on February 6, 2016.

(5) Shares subject to the option vest 1/4 annually over a period of 4 years beginning on February 4, 2017.

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.