Edgar Filing: ENDOCYTE INC - Form 4

ENDOCYTE	INC										
Form 4											
February 03,	2017										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									PPROVAL		
	- UNITED S	SIAIES		hington,			IGE (20101101155101N	OMB Number:	3235-0287	
Check this			vv as	inington,	D.C. 203	ر ۲				January 31,	
if no long	er STATEM	IENT O	F CHAN	GES IN I	BENEFI	CIAI	OW	NERSHIP OF	Expires. 2005		
subject to Section 10	SECURITIES						Estimated average burden hours per				
	Form 4 or										
Form 5 obligation	· ·						•	e Act of 1934,			
may conti <i>See</i> Instru 1(b).	nue. Section 17(3		of the Inv	•	. .			f 1935 or Sectio 40	n		
(Print or Type R	esponses)										
1. Name and Address of Reporting Person <u>*</u> Low Philip S			2. Issuer Name and Ticker or Trading				g	5. Relationship of Reporting Person(s) to Issuer			
			•	Symbol ENDOCYTE INC [ECYT]					(Check all applicable)		
(Last)	(First) (M	Aiddle)	3. Date of Earliest Transaction				(,		
3000 KENT AVE, SUITE A1-100			(Month/Day/Year) 02/02/2017					X Director 10% Owner X Officer (give title Other (specify below) below) Chief Science Officer			
	4. If Amer	4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check				
	Filed(Mon						Applicable Line) _X_ Form filed by One Reporting Person				
WEST LAFA	AYETTE, IN 479	906							Ine Reporting Pe Iore than One Re		
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	ecurit	ies Aco	uired, Disposed of	f. or Beneficial	lv Owned	
1.Title of Security (Instr. 3)	Fitle of curity2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if Transaction		4. Securities Acquired on(A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)				
_				Code V		(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)			
Common Stock	02/02/2017			А	17,500 (1)	А	\$0	251,187	D		
Common Stock								193,318	I	By spouse trust	

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.

Edgar Filing: ENDOCYTE INC - Form 4

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)	Securities		Derivative Expiration Date Securities (Month/Day/Year) Acquired (A) or Disposed of (D) (Instr. 3, 4,		7. Title and Amount o Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amoun or Number of Share
Stock Option(right to buy)	\$ 2.16	02/02/2017		А		35,000	(2)	02/02/2027	Common Stock	35,00

Reporting Owners

Reporting Owner Name / Address		1	Relationships	
	Director 10% Owner		Officer	Other
Low Philip S 3000 KENT AVE, SUITE A1-100 WEST LAFAYETTE, IN 47906	Х		Chief Science Officer	
Signaturas				

Signatures

/s/ Michael A. Sherman, Attorney-in-Fact for Philip S. Low (power of attorney previously filed)	02/03/2017
**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).
- (1) Represents restricted stock units that will vest and be paid 1/4 annually over a period of 4 years beginning on February 2, 2018, in the form of one share of common stock for each restricted stock unit.
- (2) Shares subject to the option vest 1/4 annually over a period of 4 years beginning on February 2, 2018.

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.