Edgar Filing: Orlandi Cesare - Form 4

Form 4	ire										
February 01, 2019 FORM 4 UNITED STATES SEC				Shington, GES IN SECUR 6(a) of th ility Hold	, D.C. 20 BENEF AITIES e Securi ding Cor	1CIA ties E	LOWN Exchange y Act of	ERSHIP OF Act of 1934, 1935 or Section	OMB APPROVAL OMB 3235-02 Number: January Expires: 20 Estimated average burden hours per response		
See Instru 1(b).		30(h) c	of the In	vestment	Compa	ıy Ас	ct of 1940	0			
(Print or Type F	Responses)										
Orlandi Cesare Symbol				r Name and Ticker or Trading 18 Holdings, Inc. [LNTH]				5. Relationship of Reporting Person(s) to Issuer			
				of Earliest Transaction Day/Year) 2019				(Check all applicable) <u></u> Director 10% Owner <u></u> Officer (give title Other (specify below) below) Chief Medical Officer			
				endment, Date Original nth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting			
(City)		(Zip)	Tabl	o I Non I	Dorivotivo	Soom		Person	or Bonoficial	v Ownod	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemo	ed Date, if	3. Transactic Code (Instr. 8) Code V	4. Securi on(A) or D (Instr. 3,	ties Ad sposed 4 and (A) or	cquired d of (D)	tired, Disposed of, 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	
Common Stock	01/31/2019			S <u>(1)</u>	3,060	D	\$ 16.561 (2)	77,746	D		

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)

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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. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Orlandi Cesare C/O LANTHEUS HOLDINGS, INC. 331 TREBLE COVE ROAD NORTH BILLERICA, MA 01862			Chief Medical Officer					
Signatures								
/s/ Michael P. Duffy, attorney-in-fact	02/01	/2019						
** Signature of Reporting Person	Da	ite						
Explanation of Respo	nses:							

- * 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).

Starting in 2019, the Company requires certain senior executives to cover tax liabilities resulting from the vesting of their equity awards pursuant to sell-to-cover transactions under 10b5-1 plans. The transactions reported in this Form 4 were effected pursuant to a Rule (1)

10b5-1 trading plan adopted by the reporting person on December 13, 2018, to satisfy withholding tax liabilities of the Reporting Person associated with the vesting of restricted stock previously granted and reported on a previously filed Form 4.

The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$16.31 to \$16.82, inclusive. The reporting person undertakes to provide to Lantheus Holdings, Inc., ("LNTH") any security holder of LNTH or

(2) the staff of the Securities and Exchange Commission ("SEC"), upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in this footnote (2) to this Form 4.

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.