Edgar Filing: SEATTLE GENETICS INC /WA - Form 4

| SEATTLE GI Form 4 May 20, 2014 | ENETICS INC /V | VA | | | | | | | | |
|--|---|---|--------------------------------------|---|------------------------|---------|---|------------------|---|--|
| FORM | Δ | | | | | | | | PPROVAL | |
| | UNITEDS | | RITIES All | | | NGE (| COMMISSION | OMB Number: | 3235-0287 | |
| Check this box if no longer subject to STATEMENT OF CHANG | | | | GES IN BENEFICIAL OWNERSHIP OF SECURITIES | | | | burden hou | Expires: January 31, 2005 Estimated average burden hours per response 0.5 | |
| Form 5 obligation may contin <i>See</i> Instruct 1(b). | s Section 17(a) | uant to Section () of the Public U 30(h) of the In | tility Hold | ing Com | pany | Act o | f 1935 or Sectio | | | |
| (Print or Type R | esponses) | | | | | | | | | |
| Simonian Nancy A Symbol | | | er Name and [LE GENE [] | | | - | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| (Last) 21823 30TH | | | of Earliest Tra Day/Year) 2014 | insaction | | | X Director Officer (give below) | | Owner er (specify | |
| | (Street) | | endment, Dat onth/Day/Year) | nent, Date Original Day/Year) | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| BOTHELL, | WA 98021 | | | | | | Form filed by M Person | | | |
| (City) | (State) (Z | Zip) Tab | le I - Non-Do | erivative S | ecuri | ties Ac | quired, Disposed o | f, or Beneficial | lly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | | 3. Transactic Code | 4. Securi onAcquired Disposed (Instr. 3, | ties (A) o of (D | r) | 5. Amount of Securities Beneficially | 6. Ownership | 7. Nature of Indirect Beneficial | |
| Common Stock (1) | 05/16/2014 <u>(2)</u> | | A | 3,500 | A | \$ 0 | 7,000 | 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)

| 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 nof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) 6. Date Exerci Expiration Dat (Month/Day/Y | | ate | 7. Title and Amount Underlying Securitie (Instr. 3 and 4) | |
|---|---|---|---|--|--|---------------------|--------------------|---|--------------------------------------|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amoun or Numbe of Shares |
| Non-Qualified Stock Option (right to buy) | \$ 34.25 | 05/16/2014 | | А | 8,750 | (3) | 05/15/2024 | Common Stock | 8,75 |

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Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|--|---------------|-----------|----------|-------|--|--|--|
| I B B B B B B B B B B B B B B B B B B B | Director | 10% Owner | Officer | Other | | | |
| Simonian Nancy A 21823 30TH DRIVE SE BOTHELL, WA 98021 | Х | | | | | | |
| Signatures | | | | | | | |
| By: Todd E. Simpson For: Nan Simonian | cy A. | | 05/20/20 |)14 | | | |

Explanation of Responses:

**Signature of Reporting Person

- * 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).

Date

- (1) These shares represent restricted stock units and will be settled in common stock upon vesting.
- (2) Restricted stock units shall vest in full on May 15, 2015.
- (3) The option shall vest in full on May 15, 2015.

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.