Edgar Filing: SHACKNAI JONAH - Form 4

SHACKNAI	JONAH										
Form 4											
July 05, 2012	2										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION							OMB AF	OMB APPROVAL			
	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						OMMISSION	OMB Number:	3235-0287		
Check the				0 /					Expires:	January 31,	
if no long		IENT OI	F CHAN	GES IN I	ES IN BENEFICIAL OWNERSHIP OF					2005	
subject to Section 16. SECURITIES									Estimated average burden hours per		
Form 4 or								response	0.5		
Form 5	1 The pursually to Section $10(a)$ of the Securities Exchange Act of 1754,						·				
obligation may cont		a) of the l	Public Ut	tility Hold	ling Con	ipany	Act of	1935 or Section	n		
See Instru		30(h)	of the In	vestment	Compan	y Ac	t of 194	0			
1(b).											
(Print or Type F	Responses)										
1. Name and Address of Reporting Person [*] 2. Issuer Name and Ticker or Trading 5. Relationship of							Deporting Der	on(s) to			
SHACKNA				Name and	Ticker or	Tradii	ıg	5. Relationship of Reporting Person(s) to Issuer			
SHACKINA	IJONAII		Symbol				A T				
				ICIS PHARMACEUTICAL				(Check all applicable)			
			CORP [-							
(Last)(First)(Middle)3. Date of (Month/D)7720 N. DOBSON RD.07/03/20				Date of Earliest Transaction				Director 10% Owner Officer (give title Other (specify			
			-				below) below)				
			07/03/20	012				CEO			
			4. If Ame	4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
			nth/Day/Year)				Applicable Line)				
								_X_Form filed by C			
SCOTTSDA	ALE, AZ 85256							Person	Iore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction Date	e 2A. Deen	ned	3.	4. Securi	ties A	cquired	5. Amount of	6.	7. Nature of	
Security	(Month/Day/Year)	Execution	n Date, if Transaction(A) or Disposed of (D)					Securities	Ownership	Indirect	
(Instr. 3)		any)	Code (Instr. 3, 4 and 5) ear) (Instr. 8)					Form: Direct Beneficia		
		(Month/E	Day/Year)					Owned Following	(D) or Indirect (I)	Ownership (Instr. 4)	
								Reported	(Instr. 4)	(11501.1)	
						(A) or		Transaction(s)			
				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common	07/02/0010						\$	0.45.072	D		
Stock	07/03/2012		M <u>(1)</u>	5,456	А	18.33	945,273	D			
Common Stock	07/03/2012			F	3,948	D	\$ 34.79	941,325	D		
STOCK							54.19				

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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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 ctionof Derivative Securities 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		(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
Employee Stock Option	\$ 18.33	07/03/2012		M <u>(1)</u>		5,456	07/11/2005	07/11/2012	Common Stock	5,456

Reporting Owners

Reporting Owner Name / Addr	ess	Relationships							
	Director	10% Owner	Officer	Other					
SHACKNAI JONAH 7720 N. DOBSON RD. SCOTTSDALE, AZ 85256			CEO						
Signatures									
Jonah Shacknai	07/05/2012								
<u>**</u> 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) The option was exercised pursuant to a Company program that permits net exercise by optionees during the last six months of the term of an option.

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.