

NYMOX PHARMACEUTICAL CORP

Form SC 13D

August 27, 2015

UNITED STATES  
SECURITIES AND EXCHANGE COMMISSION  
Washington, D.C. 20549  
SCHEDULE 13D

Under the Securities Exchange Act of 1934 (Amendment No. \_\_)

Nymox Pharmaceutical Corporation  
(Name of Issuer)Common Shares  
(Title of Class of\*  
Securities)67076P102  
(CUSIP Number)James G. Robinson; 10 E. Lee Street,\*  
Suite 2705 Baltimore, MD 21202; 410-752-1414  
(Name, Address and Telephone Number\*  
of Person Authorized to Receive Notices and Communications)  
05/18/2015  
(Date of\*

Event which Requires Filing of this Statement)  
If the filing person has\*

previously filed a statement on Schedule 13G to report the acquisition\*  
that is the subject of this Schedule 13D, and is filing this schedule because\*  
of 240.13d-1(e), 240.13d-1(f) or 240.13d-1(g), check the following box[ ].\*  
Note: Schedules filed in paper format shall include a signed original and five\*  
copies of the schedule, including all exhibits. See 240.13d-7(b) for other\*  
parties to whom copies are to be sent.

\*The remainder of this cover page shall be filled out for a reporting person's\*  
initial filing on this form with respect to the subject class of securities,\*  
and for any subsequent amendment containing information which would alter\*  
disclosures provided in a prior cover page. The information required on the\*  
remainder of this cover page shall not be deemed to be "filed" for the purpose\*  
of Section 18 of the Securities Exchange Act of 1934 ("Act") or otherwise\*  
subject to the liabilities of that section of the Act but shall be subject\*  
to all other provisions of the Act (however, see the Notes).\*

SCHEDULE 13D\*  
CUSIP No.  
67076P1021\*

NAMES OF REPORTING PERSONS\*  
I.R.S. IDENTIFICATION NOS. OF ABOVE PERSONS (ENTITIES ONLY)\*

James G. Robinson\*

2  
CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP\*

(a) [ ]\*  
(b) [ ]

\*  
3  
SEC USE ONLY\*

4  
SOURCE OF FUNDS (See Instructions)

PF\*

5

Edgar Filing: NYMOX PHARMACEUTICAL CORP - Form SC 13D

CHECK IF DISCLOSURE OF LEGAL PROCEEDINGS IS REQUIRED PURSUANT TO ITEMS\*  
2(D) OR 2(E) [ ]\*

6  
CITIZENSHIP OR PLACE OF ORGANIZATION\*

United States of America

\*

NUMBER OF SHARES BENEFICIALLY OWNED BY EACH REPORTING PERSON WITH\*

7  
SOLE VOTING POWER

2,167,550

8\*

SHARED VOTING POWER

-0-\*

9  
SOLE DISPOSITIVE POWER

2,167,550

10\*

SHARED DISPOSITIVE POWER

-0-\*

11  
AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON

2,167,550\*

12  
CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (11) EXCLUDES CERTAIN SHARES\*  
(See Instructions)\*

X 45,050 shares held in trust for the benefit of the children of Mr. Robinson\*

13  
PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (11)

5.66%

\*

14  
TYPE OF REPORTING PERSON (See Instructions)

IN\*  
Item 1. Security and Issuer\*  
Nymox Pharmaceutical Corporation\*  
Common Stock\*

Edgar Filing: NYMOX PHARMACEUTICAL CORP - Form SC 13D

9900 Cavendish Boulevard  
St. Laurent, Quebec, Canada  
H4M 2V2

Item 2. Identity and Background

- (a) James G. Robinson
- (b) 10 E. Lee Street, Suite 2705 Baltimore, MD 21202
- (c) Chief Executive Officer, Morgan Creek Productions, 10351 Santa Monica Blvd, Los Angeles CA, 90025
- (d) N/A
- (e) N/A
- (f) United States of America

Item 3. Source and Amount of Funds or Other Considerations

Personal funds used to acquire \$7,008,412.50 basis in stock  
Personal funds used to acquire \$196,470.50 held in trust for James G. Robinson's children\*

Item 4. Purpose of Transaction

Purpose of transaction is for profit. James G. Robinson has been recently\* elected as a board member effective 07/28/2015.\*

Item 5. Interest in Securities of the Issuer

- (a) 2,167,550 shares comprising 5.66% of total common shares outstanding
- (b) 2,167,550 shares
- (c) N/A
- (d) N/A
- (e) N/A

Item 6. Contracts, Arrangements, Understandings or Relationships with Respect\* to Securities of the Issuer N/A

Item 7. Material to Be Filed as Exhibits - N/A

Signature

After reasonable inquiry and to the best of my knowledge and belief, I certify\* that the information set forth in this statement is true, complete and correct.\*

Dated

/s/

Signature

Name/Title

The original statement shall be signed by each\* person on whose behalf the statement is filed or his authorized representative.\* If the statement is signed on behalf of a person by his authorized\* representative (other than an executive officer or general partner of this\* filing person), evidence of the representative's authority to sign on behalf\* of such person shall be filed with the statement, provided, however, that a\* power of attorney for this purpose which is already on file with the Commission\* may be incorporated by reference. The name and any title of each person who\* signs the statement shall be typed or printed beneath his signature.\*  
Attention: Intentional misstatements or omissions of fact constitute Federal\* criminal violations (See 18 U.S.C. 1001).\*

Page 1

{WLMLAW W0010741.DOC}

{WLMLAW W0010741.DOC}

{WLMLAW W0010741.DOC}

{WLMLAW W0010741.DOC}