#### NYMOX PHARMACEUTICAL CORP

Form 4 July 22, 2016

### FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

OMB Number:

3235-0287

Expires:

January 31, 2005

Estimated average

burden hours per

subject to Section 16. Form 4 or Form 5 obligations

if no longer

Check this box

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

response... 0.5

**OMB APPROVAL** 

1(b).

(Last)

(Print or Type Responses)

may continue.

See Instruction

1. Name and Address of Reporting Person \*

Robinson James George

2. Issuer Name and Ticker or Trading

Symbol

Issuer

5. Relationship of Reporting Person(s) to

NYMOX PHARMACEUTICAL CORP [NYMX]

(Check all applicable)

3. Date of Earliest Transaction

(Month/Day/Year) 07/18/2016

\_X\_\_ Director Officer (give title below)

10% Owner Other (specify

10 EAST LEE STREET, SUITE 2705

(First)

(Street)

(Middle)

4. If Amendment, Date Original

Filed(Month/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

BALTIMORE, MD 21202

(City)	(State) (Zi	p) Table 1	I - Non-De	rivative So	ecuriti	ies Acqu	ired, Disposed of	f, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr. 8)	4. Securion(A) or D (D) (Instr. 3,	4 and (A) or	d of 5)	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 Beneficial Ownership (Instr. 4)
COMMON STOCK	07/18/2016	07/18/2016	Code V P	Amount 2,500	(D)	Price \$ 3.29	2,870,050	D	
COMMON STOCK							45,050	I	TRUST
COMMON STOCK	07/18/2016	07/18/2016	P	2,500	A	\$ 3.27	2,872,550	D	
COMMON STOCK							45,050	I	TRUST
COMMON STOCK	07/19/2016	07/19/2016	P	2,500	A	\$ 3.35	2,875,050	D	

### Edgar Filing: NYMOX PHARMACEUTICAL CORP - Form 4

COMMON STOCK							45,050	I	TRUST
COMMON STOCK	07/20/2016	07/20/2016	P	2,500	A	\$ 3.41	2,877,550	D	
COMMON STOCK							45,050	I	TRUST

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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. Transact Code (Instr. 8)	5. ionNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	<b>:</b>	ate	7. Title Amoun Underly Securit (Instr. 3	nt of ying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code \	' (A) (D)	Date Exercisable	Expiration Date	Title I	Amount or Number of Shares		

# **Reporting Owners**

**ROBINSON** 

Reporting Owner Name / Address	Relationships							
Toporting of the France of France of	Director	10% Owner	Officer	Other				
Robinson James George 10 EAST LEE STREET SUITE 2705 BALTIMORE, MD 21202	X							
Signatures								
JAMES GEORGE	07/	22/2016						

07/22/2016

\*\*Signature of Reporting Person Date

Reporting Owners 2

### Edgar Filing: NYMOX PHARMACEUTICAL CORP - Form 4

## **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).

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.