Edgar Filing: Keck Barbra - Form 4

Keck Barbra												
Form 4												
March 02, 20	12											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION										PPROVAL		
. •	• UNITE	ED STATES						NGE (COMMISSION	OND	3235-0287	
Check this	s box		vv as	hington	I, D	J.C. 203	949			Number:	January 31,	
if no longer					R	FNFFL	CIA		NEDSHID OF	Expires: 2005		
subject to Section 16. STATEMENT OF CHANGES IN BENEFICIAL OWNERSHI						NERSIIII OF	Estimated average					
Section 10 Form 4 or		SECURITIES							burden hours per response 0.5			
Form 5	Filed	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,							10000100	0.0		
obligation	^{IS} Section	-							f 1935 or Sectio	n		
may conti <i>See</i> Instru		30(h)	of the Inv	vestmen	t C	ompany	y Act	of 19	40			
1(b).												
(Print or Type R	esponses)											
1 Name and A	ddress of Report	ing Person *	2 1	Name	JТ		r	_	5. Relationship of	f Reporting Per	son(s) to	
1. Name and Address of Reporting Person * Keck Barbra			2. Issuer Symbol	2. Issuer Name and Ticker or Trading					Issuer	reporting rei	3011(3) 10	
			DELCA	TH SYS	STF	EMS IN	IC ID	CTH1				
(Leat)	(First)	(Middle)							(Cheo	ck all applicable	e)	
(Last)	(First)	(Middle)	3. Date of (Month/D)		ran	isaction			Director	100	6 Owner	
				(Month/Day/Year) 02/28/2012					X Officer (give title Other (specify			
INC., 810 SEVENTH AVENUE,			02/20/2012						below) below) Vice President, Controller			
SUITE 3505									vice I I	esident, Contro	1101	
	(Street)		4. If Amer	ndment. D	Date	Original			6. Individual or J	oint/Group Filin	ng(Check	
	. ,			nth/Day/Year)					Applicable Line)			
X Form filed by 0						One Reporting Person						
NEW YORK	K, NY 10019								Form filed by M Person	More than One Ro	eporting	
(City)	(State)	(Zip)	Tabl	T Norri	Dar		• • • • • •	4		f an Dan affairt	Use Osenna d	
	· · ·							ties Ac	quired, Disposed o		•	
1.Title of Security	2. Transaction (Month/Day/Y	on Date, if						5. Amount of Securities	6. Ownership Form: Direct	7. Nature of Indirect		
(Instr. 3)	(Wondi/Day/1	any	on Date, if TransactionAcquired (A) or Code Disposed of (D)						Beneficially		Beneficial	
(Month/Day/Yes			/Day/Year)						Owned		Ownership	
									Following Reported	(Instr. 4)	(Instr. 4)	
							(A)		Transaction(s)			
				Code	V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common												
Stock	02/28/2012			А		2,800	А	\$0	5,800	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. 5. Number of Transactio-Derivative Code Securities (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8 1 2 ()
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (right to buy)	\$ 4.6	02/28/2012		А	14,000	<u>(1)</u>	02/28/2022	Common Stock	14,000	

Reporting Owners

Reporting Owner Name / Address			Relationships		
	Director	10% Owner	Officer	Other	
Keck Barbra C/O DELCATH SYSTEMS, INC. 810 SEVENTH AVENUE, SUITE 3505 NEW YORK, NY 10019			Vice President, Controller		
Signatures					

/s/ Barbra Keck 03/02/2012

Date

<u>**</u>Signature of Reporting Person

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 vests ratably on February 28, 2013, 2014 and 2015, subject to forfeiture in the event of certain circumstances and acceleration upon certain events.

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.

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