Edgar Filing: NOVAVAX INC - Form 4

NOVAVAX	INC										
Form 4											
June 12, 201	3										
FORM	14								OMB AF	PROVAL	
	UNITE	CD STATES		RITIES A shington,			IGE C	COMMISSION	OMB Number:	3235-0287	
Check th				U .					Expires:	January 31,	
if no long subject to		EMENT O	F CHAN	GES IN BENEFICIAL OWNER				NERSHIP OF	•	2005 average	
Section 1				SECURITIES					Estimated average burden hours per		
Form 4 o									response	•	
Form 5 obligatio		•					•	e Act of 1934,			
may cont				•	.			1935 or Section	n		
See Instr 1(b).		30(h)	of the In	vestment	Company	/ Act	of 194	-0			
(Print or Type I	Responses)										
1. Name and A	Address of Reporti	ing Person *	2 Issuer	Name and	Ticker or T	Frading	7	5. Relationship of	Reporting Pers	son(s) to	
Hahn Timot			Symbol					Issuer			
•				VAX INC [NVAX]				(Chast all applicable)			
(Last)	(First)	(Middle)	3 Date of	Earliest Tr	ansaction			(Chec	k all applicable	;)	
				h/Day/Year)			Director	10%	Owner		
9920 BELW	ARD CAMP	US DRIVE	06/10/2	-				X_Officer (give titleOther (specify			
								below) SVP. Ma	below) anufacturing &	PD	
	(Street)		1 If Ama	ndmant Da	to Original				-		
			nendment, Date Original Ionth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)				
Filed(Moli				un/Day/Tear)				_X_Form filed by One Reporting Person			
ROCKVILI	LE, MD 20850)						Form filed by M Person	Iore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative S	ecurit	ies Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction I			3.	4. Securiti			5. Amount of	6. Ownership		
Security (Instr. 3)	(Month/Day/Ye		n Date, if		on(A) or Dis			Securities	Form: Direct		
(Instr. 5)		any (Month/I	Day/Year)	Code (Instr. 3, 4 and 5) (Instr. 8)			2	(D) or Indirect (I)	Beneficial Ownership		
		× ×	, , , , , , , , , , , , , , , , , , ,	· · · ·				Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported			
						or		Transaction(s) (Instr. 3 and 4)			
C				Code V	Amount	(D)	Price				
Common Stock	06/10/2013			Р	21,000	А	\$ 1.88	71,000	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)

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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. Transact Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Amou Unde Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Hahn Timothy Jon 9920 BELWARD CAMPUS DRIVE ROCKVILLE, MD 20850			SVP, Manufacturing & PD					
Signatures								
John A. Herrmann III, attorney-in-fact Hahn	06/12/2013							
**Signature of Reporting Person	**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).

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.