Edgar Filing: Heaton Penny - Form 4

Heaton Penr Form 4 July 06, 200	-											
FORM	14								-	PPROVAL		
	UNITE	D STATES		AITIES A shington,			NGE (COMMISSION	OMB Number:	3235-0287		
Check th							Expires:	January 31,				
if no longer subject to STATEMENT OF CHA				NGES IN BENEFICIAL OW				NERSHIP OF	Estimated a	2005 average		
Section 16. SECURITIES							burden hours per					
Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,									response	response 0.5		
obligatio	ns Section 1						-	f 1935 or Sectio	n			
may con See Instr	unue.			vestment	•	- ·			11			
1(b).	uction	()			r	<i>,</i>						
(Print or Type l	Responses)											
				2. Issuer Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer				
Heaton Pen	-	Symbol				155001						
			NOVAVAX INC [NVAX]					(Check all applicable)				
(Last)	(First)	(Middle)		Earliest Tra	ansaction				100			
C/Ο ΝΟVΑ	(Month/Day/Year) 07/02/2009					Director 10% Owner X Officer (give title Other (specify						
	C/O NOVAVAX, INC., 9920 07/0 BELWARD CAMPUS DRIVE				102/2009				below) below) VP & Chief Medical Officer			
(Street)			4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check				
Fil				Filed(Month/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person				
ROCKVILI	LE, MD 20850							Form filed by M Person	fore than One Re	eporting		
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative S	Securi	ities Ace	quired, Disposed of	f, or Beneficial	lly Owned		
1.Title of	2. Transaction I	Date 2A. Dee	med	3.	4. Securi	ties A	cquired	5. Amount of	6. Ownership	7. Nature of		
Security					Date, if Transaction(A) or Disposed of				Form: Direct			
(Instr. 3) any (Month/Da			Code (D) Day/Year) (Instr. 8) (Instr. 3, 4 and 5)				5)	Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership		
			(1150, 0) (1150, 0) (1150, 0, 4 and 3)			Following	(Instr. 4)	(Instr. 4)				
						(A)		Reported Transaction(a)				
				a		or	D :	Transaction(s) (Instr. 3 and 4)				
Common					Amount	(D)	Price \$. ,				
Stock	07/02/2009			S	8,333	D	, Ф 2.86	18,667	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. Transacti Code (Instr. 8)	5. 6. Date Exercisable ar onNumber Expiration Date of (Month/Day/Year) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	7. Title Amount Underly Securiti (Instr. 3	it of ying ies	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owno Follo Repo Trans (Instr
	utin a O			Code V	(A) (D)	Date Exercisable	Expiration Date	o Title N o	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address				
	Director	10% Owner	Officer	Other
Heaton Penny C/O NOVAVAX, INC. 9920 BELWARD CAMPUS DRIVE ROCKVILLE, MD 20850			VP & Chief Medical Officer	
Signatures				
/s/Rahul Singhvi attorney-in-fact for Petheaton	enny	07/	02/2009	
<u>**</u> Signature of Reporting Person			Date	
Explanation of Respon	neee			

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.