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CorMedix Inc. Form 4										
February 24, 2016	5									
FORM 4									PPROVAL	
Washington, D.C. 20549							N OMB Number:	3235-0287		
Check this box if no longer									January 31, 2005	
subject to Section 16. Form 4 or	1ENT OI		SECUI	Estimated burden hou response	average Jrs per					
abligations	<i>See</i> Instruction 30(h) of the Investment Company Act of 1940									
(Print or Type Respon	ises)									
1. Name and Address of Reporting Person <u>*</u> GEORGE MICHAEL W			2. Issuer Name and Ticker or Trading Symbol CorMedix Inc. [CRMD]			5. Relationship of Reporting Person(s) to Issuer				
(Last) (I	First) (Middle) 3. Date of Earliest Transaction			(Che	heck all applicable)					
C/O CORMEDIX INC., 1430 US HIGHWAY 206, SUITE 200			(Month/Day/Year) 02/22/2016			X_ Director 10% Owner Officer (give title Other (specify below) below)				
(5	Street)		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 				
BEDMINSTER,	NJ US 0792	21					Person	More than One R	eporting	
(City) (S	State)	(Zip)	Tab	le I - Non-	Derivative	Securities A	Acquired, Disposed	of, or Beneficia	lly Owned	
	nsaction Date h/Day/Year)	2A. Deemo Execution any (Month/Da	Date, if	3. Transactic Code (Instr. 8)	Disposed (Instr. 3,	(A) or of (D) 4 and 5) (A) or	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)	
					Amount	(D) Price				
Reminder: Report on	a separate line	for each cl	ass of sec	urities bene	•	•		attan af	NEC 1474	
					inforr requi	nation con red to resp ays a curre	spond to the colle tained in this forn ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)	

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of 8
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities I
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security	(Month/Day/Year)	(Instr. 8)	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)				
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (right to buy)	\$ 2.11				<u>(1)</u>	04/05/2024	Common Stock	15,000
Stock Option (right to buy)	\$ 2.79				(2)	02/27/2024	Common Stock	30,000
Stock Option (right to buy)	\$ 5.62				(2)	03/01/2025	Common Stock	50,000
Phantom Stock	<u>(3)</u>				(3)	(3)	Common Stock	1,847
Phantom Stock	<u>(3)</u>				(3)	(3)	Common Stock	1,176
Phantom Stock	<u>(3)</u>				(3)	(3)	Common Stock	2,459
Phantom Stock	<u>(3)</u>				(3)	(3)	Common Stock	3,125
Stock Option (right to buy)	\$ 1.91	02/22/2016	A	90,000	(2)	02/21/2026	Common Stock	90,000

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
GEORGE MICHAEL W C/O CORMEDIX INC. 1430 US HIGHWAY 206, SUITE 200 BEDMINSTER, NJ US 07921	Х					

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Signatures

/s/ Alexander M. Donaldson, by Power of Attorney

02/24/2016

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

Date

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) 5,000 vest upon completion of an April 2014 milestone; 10,000 vest upon completion of another milestone by the third quarter of 2014.
- (2) These options vest in full on the first anniversary of the date of grant.
- (3) Each share of phantom stock is the economic equivalent of one share of common stock. The shares of phantom stock become payable in common stock on the tenth business day of January of the year following the reporting person's termination of service as a director.

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.