

ProtoKinetix, Inc.
Form 4
January 05, 2017

FORM 4

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

OMB APPROVAL

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type Responses)

1. Name and Address of Reporting Person *
Woodward Susan Marie

(Last) (First) (Middle)
705 DUGAN ROAD
(Street)

BELPRE, OH 45714

(City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol
ProtoKinetix, Inc. [PKTX]

3. Date of Earliest Transaction
(Month/Day/Year)
01/01/2017

4. If Amendment, Date Original Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

___ Director ___ 10% Owner
X Officer (give title below) ___ Other (specify below)
CFO

6. Individual or Joint/Group Filing(Check Applicable Line)
X Form filed by One Reporting Person
___ Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 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 Ownership (Instr. 4)		
				(A) or (D)	Code	V	Amount	(D)	Price

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

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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 Derivative Security	2. Conversion or Exercise	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any	4. Transaction Code	5. Number of Derivative Securities	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (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)		Date Exercisable	Expiration Date	Title	Amount Number Shares
				Code	V				
Option	\$ 0.05	01/01/2017	A	4,000,000	(1)	(1)	12/31/2020	Common Stock	4,000,000
Option	\$ 0.08					(2)	12/31/2019	Common Stock	4,000,000
Option	\$ 0.04					(3)	02/25/2020	Common Stock	4,000,000
Option	\$ 0.04					(4)	02/25/2020	Common Stock	2,000,000

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Woodward Susan Marie 705 DUGAN ROAD BELPRE, OH 45714			CFO	

Signatures

/s/ Susan M. Woodward 01/04/2017

**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) Options issued pursuant to the Company's 2017 Stock Option and Stock Bonus Plan. 1,000,000 shares of common stock vest on March 31, 2017; thereafter 1,000,000 shares vest every three months.

(2) Options issued pursuant to the Company's 2015 Stock Option and Stock Bonus Plan. 1,000,000 shares of common stock vest on March 31, 2016; thereafter 1,000,000 shares vest every three months.

(3) 400,000 shares of common stock vest on March 31, 2015; thereafter 400,000 shares vest monthly on the last day of each month.

(4) This option vests upon a change in control in which the Company receives a price equal to or greater than \$0.50 per issued and outstanding share of common stock as defined in Ms. Woodward's Consulting Agreement. On December 30, 2017, the Company extended Ms. Woodward's option expiration date from February 25, 2017 to February 25, 2020.

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.