Edgar Filing: Kirnon Stephen - Form 4

| Form 4 February 07, | | | | | | | | | | | |
|---|--|---|---|--|------------------------|--|---|---|---|---|--|
| FORM | 14 UNITED | UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 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 | | | | | | | | OMB APPROVAL OMB 3235-0287 Number: January 31, 2005 Estimated average burden hours per response 0.5 | |
| Check th if no long subject to Section 1 Form 4 o Form 5 obligation may cont <i>See</i> Instru 1(b). | 6. r Filed pu ns inue. | | | | | | | | | | |
| (Print or Type I | Responses) | | | | | | | | | | |
| Kirnon Stephen Sym SOI | | | | ssuer Name and Ticker or Trading ool JENO THERAPEUTICS INC NO] | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| (| | | 3. Date of Earliest Transaction (Month/Day/Year) 02/05/2018 | | | | | X_ Director10% Owner Officer (give titleOther (specify below)below) | | | |
| File | | | | 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 | | | |
| (City) | O CITY, CA 940 | JOS (Zip) | | | | _ | | Person | | | |
| | | - | | | | | - | iired, Disposed of, | | - | |
| 1.Title of Security (Instr. 3) | tity (Month/Day/Year) Execution Date, if | | 3. 4. Securities Acquired Transactior(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (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) | Ownership | | | |
| Common Stock | 02/05/2018 <u>(3)</u> | | | Code V A | Amount 5,398 (1) | (D) A | Price \$ 1.7263 (2) | 14,996 | 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) | 4. Transactio Code (Instr. 8) | 5. of Derivative Securities Acquired (A) or Disposed of (D) | | ate | Secur | ınt of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Owno Follo Repo Trans (Instr |
|---|---|---|--|--|---------------------|--------------------|-------|------------------------|---|---|
| | | | | (Instr. 3, 4, and 5) | Date Exercisable | Expiration Date | Title | Amount or Number | | (IIISU |
| | | | Code V | (A) (D) | 2 | 2 400 | | of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|--|---------------|-----------|---------|-------|--|--|--|
| | Director | 10% Owner | Officer | Other | | | |
| Kirnon Stephen 1235 RADIO ROAD, SUITE 110 REDWOOD CITY, CA 94065 | Х | | | | | | |
| Signatures | | | | | | | |
| /s/ Anish Bhatnagar, Attorney-in-Fact | 0 | 2/07/2018 | | | | | |
| <u>**Signature of Reporting Person</u> | | 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) Effective January 1, 2017, annual board and committee retainers payable to directors will be made in equivalent shares of the Issuer's common stock, on a quarterly basis.
- (2) The number of shares issuable in lieu of cash retainers was determined using the closing price per share of Issuer common stock on February 2, 2018 or \$1.7263.
- (3) Resigned from the Board of Directors effective December 31, 2017. Fees incurred for 2017 Board and committee services.

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.