## Edgar Filing: SEATTLE GENETICS INC /WA - Form 4

Form 4 April 07, 20		/WA							OMB AF	PROVAL	
Check this box if no longer subject to Section 16. Form 4 or Form 5 Filed pursuant to			SECURITIES AND EXCHANGE COMP Washington, D.C. 20549 F CHANGES IN BENEFICIAL OWNERS SECURITIES Section 16(a) of the Securities Exchange Act Public Utility Holding Company Act of 1935					<b>ERSHIP OF</b> Act of 1934,	OMB Number: Expires: Estimated a burden hour response	3235-0287 January 31, 2005 verage	
may cor See Insti 1(b).	ruction			•	•	-	ct of 1940				
1. Name and Address of Reporting Person <u>*</u> SIEGALL CLAY B			2. Issuer Name <b>and</b> Ticker or Trading Symbol SEATTLE GENETICS INC /WA [SGEN]				]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) 21823 30TH DRIVE SE							-	_X_ Director 10% Owner _X_ Officer (give title Other (specify below) below) President and CEO			
			Filed(Month/Day/Year)				Ĺ	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
	, WA 98021						i	Form filed by Me Person	ore than One Re	porting	
(City)	(State)	(Zip)	Tab	le I - Non-J	Derivativ	e Secu	rities Acqu	ired, Disposed of,	or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deen Execution any (Month/D	n Date, if	3. Transactio Code (Instr. 8) Code V	omr Dispo (Instr. 3,	sed of		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)	
Common Stock	04/03/2014			М	5,600	A	\$ 5.92	961,296	D		
Common Stock	04/03/2014			S <u>(1)</u>	5,600	D	\$ 43.3397 (2)	955,696 <u>(3)</u>	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.

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 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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. Transactic Code (Instr. 8)	5. Number onof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount Underlying Securitie (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amour or Numbe of Shares
Non-Qualified Stock Option (right to buy)	\$ 5.92	04/03/2014		М	5,600	(4)	01/31/2015	Common Stock	5,60

## **Reporting Owners**

Reporting Owner Name / Addro	ess	Relationships							
	Director	10% Owner	elationships Officer President and CEO	Other					
SIEGALL CLAY B 21823 30TH DRIVE SE BOTHELL, WA 98021	Х		President and CEO						
Signatures									
Clay B. Siegall	04/04/2014								

## **Explanation of Responses:**

\* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Date

- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) The sales reported in this Form 4 were affected pursuant to a Rule 10b5-1 trading plan.
- (2) Sale price represents a weighted average price for all shares sold on this day, which are within a \$1.00 range.
- (3) Amount of Securities beneficially owned following reported transactions includes 189,250 Restricted Stock Units subject to vesting.
- (4) Shares vested at a rate of 25% on 1/31/06 and monthly thereafter until all the shares were fully vested on 1/31/09.

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.

\*\*Signature of

Reporting Person