Edgar Filing: AVEO PHARMACEUTICALS INC - Form 4

AVEO PHAN Form 4 June 23, 2014 FORM Check thi if no long subject to Section 1 Form 4 or Form 5 obligation may cont <i>See</i> Instru 1(b).	4 UNITED is box ger 6. r Filed pur inue.	STATES IENT OI suant to S a) of the J	Wa F CHAN Section Public U	Ashington NGES IN SECUI 16(a) of th Jtility Hol	h, D.C. 20 BENEF RITIES he Securi Iding Cor	9549 ICIAL OV ties Exchar	COMMISSION WNERSHIP OF nge Act of 1934, of 1935 or Secti 940	N OMB Number: Expires: Estimated burden hou response	urs per	
(Print or Type F	Responses)									
				er Name an 9 PHARM 0]		Trading	5. Relationship of Reporting Person(s) to Issuer(Check all applicable)			
				3. Date of Earliest Transaction (Month/Day/Year) 06/19/2014			X_ Director 10% Owner Officer (give title Other (specify below) below)			
				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			
CAMBRIDGE, MA 02142							Form filed by More than One Reporting Person			
(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										
	2. Transaction Date (Month/Day/Year)		Date, if	Code (Instr. 8)	4. Securit onAcquired Disposed (Instr. 3, 4 Amount	(A) or of (D)	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)	
Reminder: Rep	ort on a separate line	for each cl	ass of sec	urities bene	ficially ow	ned directly o	or indirectly.			
Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02) required to respond unless the form displays a currently valid OMB control number.										
	Tab					posed of, or convertible s	Beneficially Owner securities)	1		

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount o	f 8
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities	D

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	(Month/Day/Year)		(Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (right to buy)	\$ 1.57	06/19/2014		A	12,500	<u>(1)</u>	06/19/2024	Common Stock	12,500

Reporting Owners

Reporting Owner Name / Address	Relationships						
r of the second second	Director	10% Owner	Officer	Other			
BATE KENNETH C/O AVEO PHARMACEUTICALS, INC. 650 E. KENDALL STREET CAMBRIDGE, MA 02142	х						
Signatures							
/s/ Joseph D. Vittiglio, attorney-in-fact	06/23/2014						
***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) This option vests in twelve equal monthly installments, with the first tranche exercisable on August 1, 2014.

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.

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