Chondros Dimitrios Form 4 February 14, 2019

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

OMB Washington, D.C. 20549 Number:

Check this box if no longer subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF Form 5

obligations may continue. See Instruction 1(b).

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

SECURITIES

30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *

Chondros Dimitrios

2. Issuer Name and Ticker or Trading

Symbol

HALOZYME THERAPEUTICS

INC [HALO]

(Month/Day/Year)

02/12/2019

5. Relationship of Reporting Person(s) to

Issuer

(Check all applicable)

C/O HALOZYME

(Last)

1.Title of

Security

(Instr. 3)

(First)

3. Date of Earliest Transaction

Director X_ Officer (give title

Other (specify

10% Owner

OMB APPROVAL

Expires:

response...

Estimated average

burden hours per

3235-0287

January 31,

2005

0.5

below) SVP, Chief Medical Officer

THERAPEUTICS, INC., 11388 SORRENTO VALLEY ROAD

(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

SAN DIEGO, CA 92121

(City) (State) (Zip)

(Middle)

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

2. Transaction Date 2A. Deemed (Month/Day/Year)

Execution Date, if (Month/Day/Year)

3. Code (Instr. 8)

4. Securities TransactionAcquired (A) or Disposed of (D) (Instr. 3, 4 and 5)

5. Amount of Securities Beneficially Owned Following

6. Ownership 7. Nature of Form: Direct (D) or Indirect Beneficial (Instr. 4) (Instr. 4)

Indirect Ownership

(A)

Code V Amount (D) Price

Reported Transaction(s) (Instr. 3 and 4)

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.

SEC 1474 (9-02)

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of or 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 Securition (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amou or Numb of Sha
Option to Purchase Common Stock	\$ 16.65	02/12/2019		A	71,602	02/12/2020(1)	02/12/2029	Common Stock	71,6
Restricted Stock Units	\$ 0	02/12/2019		A	37,538	02/12/2020(2)	(2)	Common Stock	37,5

Reporting Owners

Reporting Owner Name / Address	Relationships					
F-	Director	10% Owner	Officer	Other		
Chondros Dimitrios						
C/O HALOZYME THERAPEUTICS, INC.			SVP, Chief Medical Officer			
11388 SORRENTO VALLEY ROAD			SVF, Cilier Medical Officer			
SAN DIEGO, CA 92121						

Signatures

/s/ James R. Oehler as attorney-in-fact for Dimitrios
Chondros

02/14/2019

**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 one-fourth on such date and then 1/48th monthly thereafter.
- (2) This award vests one-fourth on the first anniversary of the grant date and then one-fourth on each anniversary date thereafter.

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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