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Levine Mitch Form 4	nell S										
June 15, 2018	8										
FORM		OMB APPROVAL									
	UNITED	STATES		CURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549				NOMB Number:	3235-	0287	
Check thi if no long subject to Section 10 Form 4 or	er STATEN 6.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES							Expires: January 20 Estimated average burden hours per response		
Form 5 obligatior may conti <i>See</i> Instru 1(b).	^{1s} Section 17(response 0.4 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 R	Responses)										
1. Name and Address of Reporting Person <u>*</u> Levine Mitchell S			2. Issuer Name and Ticker or Trading Symbol			5. Relationship of Reporting Person(s) to Issuer					
			OncoCyte Corp [OCX]				(Check all applicable)				
(Last) (First) (Middle) 1010 ATLANTIC AVE, SUITE 102			3. Date of Earliest Transaction (Month/Day/Year)			Director 10% Owner X Officer (give title Other (specify					
IOIOAILA	1111 102	06/13/2018				below) below) Chief Financial Officer					
				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 				
ALAMEDA	, CA 94501						Person	More than One R	eporting		
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative	Securities A	cquired, Disposed	of, or Beneficia	lly Owned	1	
	2. Transaction Date (Month/Day/Year)	2A. Deeme Execution I any (Month/Da	Date, if	3. Transactio Code (Instr. 8)	4. Securiti nAcquired Disposed (Instr. 3, 4	(A) or of (D)	Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature Indirect Beneficia Ownershi (Instr. 4)	ıl	
				Code V		(D) Price	(Instr. 3 and 4)				
Reminder: Repo	ort on a separate line	e for each cla	ass of sec	urities bene	Perso inform requir	ns who res nation cont ed to resp	or indirectly. spond to the colle ained in this form ond unless the for ntly valid OMB co	are not rm	SEC 1474 (9-02)		

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

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

number.

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(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)				
				Code V	V (A) (D)) Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Option to Purchase Common Stock	\$ 2.55	06/13/2018		A	45,000	<u>(1)</u>	06/12/2028	Common Stock	45,000
Option to Purchase Common Stock	\$ 2.35					(2)	05/22/2028	Common Stock	50,000
Option to Purchase Common Stock	\$ 2.35					<u>(3)</u>	05/22/2028	Common Stock	125,000
Option to Purchase Common Stock	\$ 5.9					<u>(4)</u>	11/14/2027	Common Stock	200,000

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Levine Mitchell S 1010 ATLANTIC AVE, SUITE 102 ALAMEDA, CA 94501			Chief Financial Officer			
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Signatures

/s/Mitchell S. 06/15/2018 Levine

<u>**</u>Signature of Reporting Person

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).

One half of the options shall vest upon acceptance of the completion of the clinical validation study manuscript for OncoCyte's (1) DetermaVu product candidate, and the balance shall vest upon the start of the clinical utility study for OncoCyte's DetermaVu product

(2) One quarter of the options shall vest on the one-year anniversary of the grant date and the balance shall vest thereafter in 36 equal monthly installments.

candidate.

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These options vest as to one-third of the shares on each of the completion of the clinical utility study for OncoCyte's DetermaVu product
 (3) candidate, the filing of the Medicare dossier for the Medicare local coverage determination, and obtaining a Medicare local coverage determination for OncoCyte's DetermaVu product candidate.

One quarter of the options shall vest on November 14, 2018, subject to the completion of 12 months of continuous employment from the(4) date of grant, and the balance shall vest in 36 monthly installments upon the completion of each month of continuous employment from the first anniversary of the date of grant.

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.