Edgar Filing: CorMedix Inc. - Form 4

CorMedix In Form 4 June 29, 201							
FORM	4			OMB APPROVAL			
	UNITED STAT	ES SECURITIES AND EXCHA Washington, D.C. 20549	NGE COMMISSION	Number: 3235-0287			
Check th if no long	ter	OF CHANGES IN BENEFICIA		Expires: January 31, 2005			
subject to	Estimated average						
Section 1 Form 4 o	burden hours per response 0.5						
Form 5	Filed pursuant t	o Section 16(a) of the Securities E	xchange Act of 1934,	16300136 0.3			
obligation may cont	ns Section 17(a) of the	e Public Utility Holding Company	y Act of 1935 or Section	n			
See Instru		h) of the Investment Company Ac	t of 1940				
1(b).							
(Print or Type I	Responses)						
1. Name and Address of Reporting Person * 2. Issuer Name and Ticker or Trading Dillione Janet Symbol			ng 5. Relationship of Issuer	Reporting Person(s) to			
		Symbol CorMedix Inc. [CRMD]	1550001				
(Last)	(First) (Middle)	3. Date of Earliest Transaction	(Chec	k all applicable)			
(Last)	(Tilst) (Wilduc)	(Month/Day/Year)	X_ Director	10% Owner			
	EDIX INC., 1430 U.S.	06/08/2016	Officer (give below)	Officer (give titleOther (specify elow) below)			
HIGHWAY	206, SUITE 200		below)	below)			
	(Street)	4. If Amendment, Date Original		6. Individual or Joint/Group Filing(Check			
			**	Applicable Line) _X_ Form filed by One Reporting Person			
BEDMINST	FER, NJ 07921			fore than One Reporting			
(City)	(State) (Zip)						
		Table I - Non-Derivative Secur		•			
1.Title of Security	2. Transaction Date 2A. D (Month/Day/Year) Exect	eemed 3. 4. Securities A tion Date, if Transaction(A) or Dispose		6. Ownership 7. Nature of Form: Direct Indirect			
(Instr. 3)	any	Code (D)	Beneficially	(D) or Beneficial			
	(Mon	th/Day/Year) (Instr. 8) (Instr. 3, 4 and		Indirect (I)Ownership(Instr. 4)(Instr. 4)			
		(A)	Reported				
		or	Transaction(s) (Instr. 3 and 4)				
Common		Code V Amount (D)	Price \$				
Stock	06/08/2016	P 3,738 A	^{\$} 2.67 ^{18,738}	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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. orNumber of Derivativ Securitie: Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration D (Month/Day, e s	xpiration Date Unde		Title and Amount of Underlying Securities Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (Right to buy Common Stock)	\$ 3.03					<u>(1)</u>	08/11/2025	Common Stock	50,000	
Phantom Stock	\$ 0 <u>(2)</u>					(2)	(2)	Common Stock	1,415	
Stock Option (Right to buy Common Stock)	\$ 1.91					<u>(3)</u>	02/21/2026	Common Stock	95,000	
Phantom Stock	\$ 0 <u>(2)</u>					(2)	(2)	Common Stock	3,831	
Phantom Stock	\$ 0 <u>(2)</u>					(2)	(2)	Common Stock	2,767	

Reporting Owners

Reporting Owner Name / Address	Relationships				
	Director	10% Owner	Officer	Other	
Dillione Janet C/O CORMEDIX INC. 1430 U.S. HIGHWAY 206, SUITE 200 BEDMINSTER, NJ 07921	Х				
Signatures					
/s/ Alexander M. Donaldson, by Power of Attorney	:	06/29/2016			
**Signature of Reporting Person		Dat	te		

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) The options shall vest as follows: 1/3 on 8/12/2015, 1/3 on 8/12/2016, and 1/3 on 8/12/2017.
- (2) Each share of phantom stock is the economic equivalent of one share of common stock. The shares of phantom stock become payable in common stock on the tenth business day of January of the year following the reporting person's termination of service as a director.
- (3) The options vest in full on 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.