VERNON W ANTHONY

Form 4 June 04, 2018

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

3235-0287

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January 31, Expires: 2005

OMB APPROVAL

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if no longer subject to Section 16. Form 4 or Form 5

obligations

may continue.

See Instruction

Check this box

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

1(b).

(Last)

(Instr. 3)

(Print or Type Responses)

1. Name and Address of Reporting Person * VERNON W ANTHONY

2. Issuer Name and Ticker or Trading Symbol

3. Date of Earliest Transaction

5. Relationship of Reporting Person(s) to

Issuer

below)

NovoCure Ltd [NVCR]

(Middle)

(Check all applicable)

C/O NOVOCURE INC., 20

(First)

(Month/Day/Year) 05/31/2017

X_ Director 10% Owner Officer (give title Other (specify

6. Individual or Joint/Group Filing(Check

VALLEY STREAM PARKWAY, **SUITE 300**

> (Street) 4. If Amendment, Date Original

> > Applicable Line)

Filed(Month/Day/Year)

X Form filed by One Reporting Person Form filed by More than One Reporting

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

MALVERN, PA 19355

(City) (State) (Zip) 1. Title of 2. Transaction Date 2A. Deemed Security

4. Securities 3. (Month/Day/Year) Execution Date, if TransactionAcquired (A) or Code Disposed of (D) (Instr. 3, 4 and 5) (Month/Day/Year) (Instr. 8)

5. Amount of 6. Ownership 7. Nature of Securities Form: Direct Indirect Beneficially (D) or Indirect Beneficial Ownership Owned (Instr. 4) (Instr. 4) Following

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

Code V Amount (D) Price

or

Reminder: Report on a separate line for each class of securities beneficially owned directly 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.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of 3. Transaction Date 3A. Deemed

5. Number of

6. Date Exercisable and

7. Title and Amount of **Underlying Securities**

Derivative (Month/Day/Year) Execution Date, if TransactiorDerivative **Expiration Date** Conversion

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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
Options to Buy Ordinary Shares	\$ 31.45	05/31/2018		A	12,345		<u>(1)</u>	05/31/2028	Ordinary Shares	12,345
Restricted Stock Unit	<u>(2)</u>	05/31/2018		A	6,145		(3)	<u>(3)</u>	Ordinary Shares	6,145

Reporting Owners

Reporting Owner Name / Address

Director 10% Owner Officer Other

VERNON W ANTHONY
C/O NOVOCURE INC.
20 VALLEY STREAM PARKWAY, SUITE 300
MALVERN, PA 19355

Signatures

By: /s/ Kimberly Burke, Attorney in fact for William A. Vernon

06/04/2018

**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).
- Options to buy 12,345 ordinary shares will fully vest and become exercisable on the earlier of the following dates: (i) the first anniversary of the grant date or (ii) the day immediately preceding the Company's 2019 annual general meeting of shareholders.
- (2) Each restricted stock unit represents the right to receive, at settlement, one (1) ordinary share.
- (3) These restricted stock units are scheduled to vest 100% on the earlier of the following dates: (i) the first anniversary of the grant date or (ii) the day immediately preceding the Company's 2019 annual general meeting of shareholders.

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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