Edgar Filing: CEL SCI CORP - Form 4

CEL COLCODE

| Form 4 | | | | | | | | | | | |
|--|---|--|---|---|---|--|-----------|--|--|---|--|
| October 03, 20 | Л | | CECUE | | | | | | | PPROVAL | |
| UNITED STATES SECURIT | | | | ITIES AND EXCHANGE COMMISSION hington, D.C. 20549 | | | | OMB Number: | 3235-0287 | | |
| if no longe subject to Section 16 Form 4 or Form 5 obligations may contin <i>See</i> Instruc 1(b). | r STATEN Filed pur Sue. Section 17(| STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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 | | | | | | | burden hou response | Estimated average burden hours per response 0.5 | |
| (Print or Type Re | esponses) | | | | | | | | | | |
| TALOR EYAL S | | | 2. Issuer Name and Ticker or Trading Symbol | | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| (Last) | (First) (| Middle) | CEL SCI CORP [CVM] 3. Date of Earliest Transaction | | | | | (Cheo | eck all applicable) | | |
| (Mont | | | (Month/Da | Month/Day/Year))9/30/2016 | | | | Director 10% Owner X Officer (give title Other (specify below) below) Chief Scientific Officer | | | |
| | | | | Amendment, Date Original (Month/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| VIENNA, VA | A 22182 | | | | | | | Form filed by M Person | More than One Re | eporting | |
| (City) | (State) | (Zip) | Table | e I - Non-E | Derivative S | Securi | ties Ac | quired, Disposed o | f, or Beneficia | lly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Dat (Month/Day/Year) |) Execution any | emed on Date, if Day/Year) | Code (Instr. 8) | 4. Securi onAcquired Disposed (Instr. 3, | l (A) o l of (D 4 and (A) or |) | 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) | |
| Common Stock | 09/30/2016 | | | A | 8,000 | A | \$ 0.3 | 3,242,511 | 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. Transactic Code (Instr. 8) | 5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, | | ate | 7. Titl Amou Under Secur (Instr. | int of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr |
|---|---|---|---|--|--|---------------------|--------------------|--|--|---|---|
| | | | | Code V | 4, and 5) (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Addre | SS | Relationships | | | | | | |
|--|------------|---------------|--------------------------|-------|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | |
| TALOR EYAL 8229 BOONE BLVD STE 802 VIENNA, VA 22182 | | | Chief Scientific Officer | | | | | |
| Signatures | | | | | | | | |
| Eyal Talor | 10/03/2016 | | | | | | | |
| <u>**Signature of</u> 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).

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.