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MCKINNEY ROBERT A Form 5 February 14, 2005 FORM 5

OMB APPROVAL OMB UNITED STATES SECURITIES AND EXCHANGE COMMISSION 3235-0362 Number: Washington, D.C. 20549 Check this box if January 31, Expires: no longer subject 2005 to Section 16. Estimated average ANNUAL STATEMENT OF CHANGES IN BENEFICIAL Form 4 or Form burden hours per 5 obligations **OWNERSHIP OF SECURITIES** response... 1.0 may continue. See Instruction Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, 1(b). Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section Reported 30(h) of the Investment Company Act of 1940 Form 4 Transactions Reported 1. Name and Address of Reporting Person * 2. Issuer Name and Ticker or Trading 5. Relationship of Reporting Person(s) to Issuer MCKINNEY ROBERT A Symbol PROGENICS (Check all applicable) PHARMACEUTICALS INC [PGNX] Director 10% Owner Х _ Officer (give title Other (specify 3. Statement for Issuer's Fiscal Year Ended (Last) (First) (Middle) below) below) (Month/Day/Year) Vice President, Finance & Oper 12/31/2004 MCKINNEY, ROBERT A., 4 CATALPA DRIVE (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Reporting Filed(Month/Day/Year) (check applicable line) DANBURY. CTÂ 06811 _X_ Form Filed by One Reporting Person _ Form Filed by More than One Reporting Person (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 3. 1.Title of 2. Transaction Date 2A. Deemed 4. Securities 5. Amount of 6. Ownership 7. Nature of Security (Month/Day/Year) Execution Date, if Transaction Acquired (A) or Securities Form: Direct Indirect (D) or (Instr. 3) Disposed of (D) Beneficially Beneficial anv Code (Month/Day/Year) (Instr. 8) (Instr. 3, 4 and 5) Owned at end Indirect (I) Ownership of Issuer's (Instr. 4) (Instr. 4) (A) Fiscal Year or (Instr. 3 and 4) Amount (D) Price

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

Persons who respond to the collection of information **SEC 2270** contained in this form are not required to respond unless the form displays a currently valid OMB control number.

(9-02)

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

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 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 of Underlying Securities (Instr. 3 and 4)	
					(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Options (Right to buy)	\$ 18.86 (1) (2)	01/01/2004	Â	A4	331	Â	04/01/2004	07/01/2004	Common Stock	331
Employee Stock Options (Right to buy)	\$ 19.04 (1) (2)	04/01/2004	Â	A4	328	Â	07/01/2004	10/01/2004	Common Stock	328
Employee Stock Options (Right to buy)	\$ 16.85 (1)	07/01/2004	Â	A4	371	Â	10/01/2004	01/01/2005	Common Stock	371
Employee Stock Options (Right to buy)	\$ 14.65 (1)	10/01/2004	Â	A4	427	Â	01/01/2005	04/01/2005	Common Stock	427

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Reporting Owners

Reporting Owner Name / Address	Relationships					
1		10% Owner	Officer	Other		
MCKINNEY ROBERT A MCKINNEY, ROBERT A. 4 CATALPA DRIVE DANBURY, CT 06811	Â	Â	Vice President, Finance & Oper	Â		
Signatures						
Robert A.	/14/2005					

McKinney 02/14/2005

Date

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<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).
- ** 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 exercise price per share for each option shall be the lesser of this amount or 85% of the fair market value of the Common Stock on the date of exercise.
- (2) The exercise of these options was previously reported in 2004.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.