Edgar Filing: OncoMed Pharmaceuticals Inc - Form 4

OncoMed P Form 4 June 26, 201	harmaceuticals In	ic									
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL			
	SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549					NOMB Number:	3235-				
Check th if no lon subject t Section Form 4 of Form 5 obligation may con <i>See</i> Instr 1(b).	ger o 16. or Filed pur ons stinue.	rsuant to S (a) of the 3	Section Public U	NGES IN SECUF 16(a) of th Jtility Hol nvestment	Estimated burden hou response	Estimated average burden hours per response 0.5					
(Print or Type	Responses)										
1. Name and A Winninghan	2. Issuer Name and Ticker or Trading Symbol OncoMed Pharmaceuticals Inc [OMED]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
(Last) C/O ONCO PHARMAO CHESAPE	3. Date of Earliest Transaction (Month/Day/Year) 06/24/2015				X_ Director10% Owner Officer (give titleOther (specify below) below)						
DEDWOOI	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 						
	D CITY, CA 9400	03						Person		1 0	
(City)	(State)	(State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deem Execution any (Month/D	Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3, 4	(A) or of (D) 4 and 5 (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 Indirect Beneficia Ownershi (Instr. 4)	1
Reminder: Rep	port on a separate line	e for each cl	lass of sec	urities bene	-		-	-			
					Dorco	ne wh	no roc	nand to the colle	ation of (SEC 1474	

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)

1. Title of Derivative Security (Instr. 3)	e Conversion (Month/Day/Year) Execution I or Exercise any		Execution Date, if	4. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exerc Expiration D (Month/Day/	ate	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8 C S (1
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (Right to Buy)	\$ 24.6	06/24/2015		А	30,000		<u>(1)</u>	06/24/2025	Common Stock	30,000	
Reporting Owners											
Reporting Owner Name / Address				Relationships Director 10% Owner Officer Other							
C/O ONC 800 CHES	am Rick E COMED PH SAPEAKE OD CITY, (ALS, INC. X	<u> </u>							
Signa	tures										
/s/ Alicia J. Hager, attorney-in-fact for Rick Winningham			Rick	06/26/2015							
	<u>**</u> Signatu	are of Reporting Person			Date						

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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).

The stock option will vest and become exercisable as to one-third of the shares subject thereto on each anniversary of the grant date, such
 (1) that the option will be vested and exercisable for 100% of the shares subject thereto on June 24, 2018, subject to the Reporting Person's continued service to the Issuer through each such vesting date.

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.