

CorMedix Inc.
Form 4
March 22, 2016

FORM 4

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

OMB APPROVAL

OMB Number: 3235-0287
Expires: January 31, 2005
Estimated average burden hours per response... 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *
Duffy Matthew

(Last) (First) (Middle)

C/O CORMEDIX INC., 745 ROUTE 202-206, SUITE 303

(Street)

BRIDGEWATER, NJ 08807

(City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol
CorMedix Inc. [CRMD]

3. Date of Earliest Transaction (Month/Day/Year)
02/12/2016

4. If Amendment, Date Original Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

Director 10% Owner
 Officer (give title below) Other (specify below)

6. Individual or Joint/Group Filing(Check Applicable Line)

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

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

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	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 Ownership (Instr. 4)
				(A) or (D) Code V Amount (D) Price			
Common Stock, \$0.001 par value per share					53,223	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.

SEC 1474 (9-02)

Edgar Filing: CorMedix Inc. - Form 4

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)		
				Code	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (right to buy)	\$ 2.02					<u>(1)</u>	01/09/2024	Common Stock, \$0.001 par value per share	150,000
Stock Option (right to buy)	\$ 2.02					<u>(2)</u>	01/09/2024	Common Stock, \$0.001 par value per share	30,000
Stock Option (right to buy)	\$ 0.9					<u>(3)</u>	03/20/2023	Common Stock, \$0.001 par value per share	100,000
Stock Option (right to buy)	\$ 0.68					<u>(4)</u>	12/05/2022	Common Stock, \$0.001 par value per share	125,000
Warrant (right to purchase Common Stock)	\$ 0.4					11/13/2012	11/13/2017	Common Stock, \$0.001 par value per share	25,000
Stock Option (right to buy)	\$ 0.29					<u>(2)</u>	01/06/2022	Common Stock, \$0.001 par value per share	5,000
Stock Option (right to buy)	\$ 0.28					<u>(6)</u>	11/21/2021	Common Stock, \$0.001 par value	15,000

							per share
Stock Option (right to buy)	\$ 5.62				<u>(2)</u>	03/01/2025	Common Stock, \$0.001 par value per share 50,000
Phantom Stock	<u>(7)</u>				<u>(7)</u>	<u>(7)</u>	Common Stock, \$0.001 par value per share 594
Stock Option (right to buy)	\$ 1.91				<u>(2)</u>	02/21/2026	Common Stock, \$0.001 par value per share 75,000
Phantom Stock	<u>(7)</u>	02/12/2016	A	1,653 <u>(8)</u>	<u>(7)</u>	<u>(7)</u>	Common Stock, \$0.001 par value per share 1,653

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Duffy Matthew C/O CORMEDIX INC. 745 ROUTE 202-206, SUITE 303 BRIDGEWATER, NJ 08807			X	

Signatures

Alexander M. Donaldson, with a Power of Attorney for Matthew P. Duffy 03/22/2016

 **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).
- (1) These options vested 100% on January 10, 2014.
 - (2) These options vest in full on the first anniversary of the date of grant.
 - (3) These options vest quarterly over two years.
 - (4) These options vest as follows: (a) fifty percent (50%) on the date of issuance of the CE Mark certification for Neutrolin in Europe, which occurred on July 5, 2013, and (b) fifty percent (50%) on December 31, 2013.
 - (5)

Edgar Filing: CorMedix Inc. - Form 4

On November 13, 2012, the reporting person acquired in a private placement \$10,000 of (a) 9% Senior Convertible Notes, convertible into shares of the Company's common stock at a conversion price of \$0.35 per share, and (b) a five-year redeemable warrant to purchase common stock at an exercise price of \$0.40 per share.

- (6) The options vest ratably, one-third of which will vest on each of the grant date, the first anniversary and the second anniversary thereof.
- (7) 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.
- (8) These shares were credited automatically to the reporting person's account pursuant to the reporting person's election to defer the receipt of cash compensation of director's fees.

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.