INNOVUS PHARMACEUTICALS, INC.

Form 4

November 21, 2016

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

OMB Number:

3235-0287

2005

0.5

Check this box if no longer subject to

Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

January 31, Expires:

Estimated average burden hours per

OMB APPROVAL

response...

Form 4 or Form 5 obligations may continue.

See Instruction

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).

(Print or Type Responses)

1. Name and Address of Reporting Person * LIU VIVIAN H

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to

Symbol

INNOVUS PHARMACEUTICALS,

(Check all applicable)

INC. [INNV]

(Last) (First) (Middle) 3. Date of Earliest Transaction

Director 10% Owner

(Month/Day/Year)

10/01/2016

Officer (give title Other (specify

9171 TOWNE CENTRE DRIVE, SUITE 440

> (Street) 4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check

Filed(Month/Day/Year)

Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting

(Instr. 4)

Issuer

below)

SAN DIEGO, CA 92122

(State) (Zip)

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

1. Title of Security (Instr. 3)

(City)

2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if

(Month/Day/Year)

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 3, 4 and 5) (Instr. 8)

5. Amount of Securities Beneficially Owned

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial Ownership (I)

(Instr. 4)

Following Reported

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

Code V 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 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 Derivative Conversion

3. Transaction Date 3A. Deemed

5. Number of (Month/Day/Year) Execution Date, if TransactiorDerivative

6. Date Exercisable and **Expiration Date**

7. Title and Amount Underlying Securities

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	Securities Acquired (A) of Disposed of (I (Instr. 3, 4, and 5)	(Month/Day/Year)		(Instr. 3 and	4)
				Code V	(A) (I	D) Date Exercisable	Expiration Date	Title	Amoun Numbe Shares
Restricted Stock Units	(1) (2)	10/01/2016		A(3)	11,538	10/01/2016	10/01/2026	Common Stock	11,53
Restricted Stock Units	<u>(1)</u> <u>(4)</u>	11/16/2016		A(3)	416,667	11/16/2016	11/16/2026	Common Stock	416,6

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

LIU VIVIAN H 9171 TOWNE CENTRE DRIVE SUITE 440 SAN DIEGO, CA 92122

Signatures

/s/ Vivian Liu 11/21/2016

**Signature of 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) Each restricted stock unit represents the right to receive, at settlement, one share of common stock.
- (2) The reporting person was granted a Restricted Stock unit on October 1, 2016 of 11,538 shares, which was fully vested on the date of grant.
- (3) These restricted stock units were granted pursuant to the Issuer's 2016 Equity Incentive Plan.
- (4) The Reporting Person was granted a Restricted Stock Unit on November 16, 2016 of 416,667 shares, which was fully vested on the date of the grant.

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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