Edgar Filing: COLEMAN LEWIS W - Form 4

COLEMAN Form 4	LEWIS W										
October 31,	2017										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSIO Washington, D.C. 20549							OMMISSION	OMB AF OMB Number:	PROVAL 3235-0287		
Check th if no long subject to Section 1 Form 4 o Form 5 obligatio may cont <i>See</i> Instru 1(b).	ger 5 16. 5 5 5 5 5 5 5 5 5 5 5 5 5	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								January 31Expires:2009Estimated averageburden hours perresponse0.9	
(Print or Type I	Responses)										
1. Name and Address of Reporting Person <u>*</u> COLEMAN LEWIS W			2. Issuer Name and Ticker or Trading Symbol Immune Design Corp. [IMDZ]					5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (I	Middle)	3. Date of Earliest Transaction			(Check all applicable)					
C/O IMMUNE DESIGN CORP., 1616 EASTLAKE AVE. E., SUITE 310			(Month/Day/Year) 10/27/2017					X_ Director 10% Owner Officer (give title Other (specify below) below)			
Filed(Mo				Ionth/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 			
SEATTLE,	WA 98102							Person			
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative	Secur	ities Acqu	iired, Disposed of,	or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	Security (Month/Day/Year) Execution Date, if		3. 4. Securities Acquired (A Transactionor Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or Code V Amount (D) Price			 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	10/27/2017			P	65,000	A	\$ 4.0731	125,000	I	By Trust (2)	
Common Stock								3,000	Ι	By Wife's IRA	

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

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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)	4. Transacti Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Inst
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Other

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	(
COLEMAN LEWIS W C/O IMMUNE DESIGN CORP. 1616 EASTLAKE AVE. E., SUITE 310 SEATTLE, WA 98102	Х					
Signatures						
/s/ Stephen R. Brady, Attorney-In-Fact	10/31/2	2017				
**Signature of Reporting Person	Date					
Evelowether of Deenew						

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 price reported on Column 4 is a weighted average price. These shares were purchased in multiple transactions ranging from \$4.00 to (1) \$4.10 on October 27, 2017. The reporting person will provide upon request to the SEC, the issuer or security holder of Issuer, full information regarding the number of shares purchased at each separate price.

On September 20, 2016, the reporting person filed a Form 4 which inadvertently reported that the acquisition of 50,000 shares of the

Issuer's Common Stock was held directly by the reporting person. Subsequently, on December 22, 2016, the reporting person disposed of (2) 10,000 shares. This Form 4 corrects the reporting person's holdings to reflect that the remaining 40,000 shares are held indirectly by the reporting person's trust.

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.