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Tuck David Form 4											
May 17, 2018											
FORM 4	1								PPROVAL		
	UNITED	STATES		RITIES . Ishingtor			GE COMMISSION	N OMB Number:	3235-0287		
									urs per		
(Print or Type Resp	onses)										
1. Name and Address of Reporting Person <u>*</u> Tuck David			Symbol	er Name an S INC [Cl		or Trading	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last)	(First) (1	Middle)	3. Date of Earliest Transaction				(Check an applicable)				
C/O CURIS, INC., 4 MAGUIRE ROAD			(Month/Day/Year) 05/15/2018				Director 10% Owner X Officer (give title Other (specify below) below) Chief Medical Officer				
	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)				Applicable Line) _X_ Form filed by	_X_ Form filed by One Reporting Person			
LEXINGTON,	MA 02421						Form filed by Person	More than One R	eporting		
(City)	(State)	(Zip)	Tab	ole I - Non-	Derivati	ve Securitie	s Acquired, Disposed o	of, or Beneficia	lly Owned		
	ransaction Date nth/Day/Year)	Execution any	Date, if	3. Transactic Code (Instr. 8) Code V	Dispos (Instr. 3	(A) or ed of (D) 3, 4 and 5) (A) or	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)		
Reminder: Report o	on a senarate line	for each cl	ass of sec	urities bene	eficially c	wned direct	ly or indirectly				
Kenninger, Report o	n a separate fille		uss 01 sec	unites bell	Pers info requ disp	sons who rmation co uired to rea	respond to the colle ontained in this form spond unless the for rrently valid OMB co	n are not rm	SEC 1474 (9-02)		

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	orDerivative	Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8	8)	Acquired (A Disposed of (Instr. 3, 4, 5)	f (D)				
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount Number Shares
Employee stock option (right to buy)	\$ 0.69	05/15/2018 <u>(1)</u>		A		535,000		<u>(1)</u>	01/21/2028	Common stock	535,00

Reporting Owners

Reporting Owner Name / Address				
	Director	10% Owner	Officer	Other
Tuck David C/O CURIS, INC. 4 MAGUIRE ROAD LEXINGTON, MA 02421			Chief Medi	cal Officer
Signatures				
William Steinkrauss, Attorney-in-fact		05/17/201	8	

Date

**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).

This option grant, as disclosed in Curis Inc.'s 2018 proxy statement, was approved by the Compensation Committee of the Board of Directors of Curis, Inc. on January 22, 2018, contingent upon shareholder approval of Curis's Third Amended and Restated 2010 Stock Incentive Plan to increase the number of shares authorized for issuance thereunder; and further provided that such option would not be

(1) exercisable and no common stock would be issued thereunder, if the Third Amended and Restated 2010 Plan was not approved by Curis's shareholders. On May 15, 2018, at the 2018 annual meeting of shareholders, Curis's shareholders approved the Third Amended and Restated 2010 Plan. The option grant described in this Form 4 filing vests as to 25% of the original shares on January 22, 2019 and as to an additional 6.25% of the original shares each successive quarter and until January 22, 2022.

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.