Edgar Filing: CELGENE CORP /DE/ - Form 4

| CELGENE Form 4 | CORP /DE/ | | | | | | | | |
|--|---|--------------------------------|---|--|---|--|---|---|---|
| January 31, | , 2017 | | | | | | | | |
| FORM | M 4 | | | | | | | PPROVAL | |
| UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | OMB Number: | 3235-0287 | |
| Check this box if no longer subject to Section 16. Form 4 or | | | | ES IN BENEFICIAL OWNERSHIP OF ECURITIES a) of the Securities Exchange Act of 1934, | | | | January 31, 2005 average urs per . 0.5 | |
| obligati may con <i>See</i> Inst 1(b). | ntinue. section 17(| (a) of the Pu | | olding Co | mpany Act | of 1935 or Sectio | n | | |
| (Print or Type | e Responses) | | | | | | | | |
| 1. Name and Address of Reporting Person <u>*</u> FOUSE JACQUALYN A | | | 2. Issuer Name and Ticker or Trading Symbol CELGENE CORP /DE/ [CELG] | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| (Last) | (First) (| | Date of Earliest | | | (Chec | k all applicabl | le) | |
| C/O CELC CORPORA | . , , , | [] [] [] | Month/Day/Year) 1/30/2017 | | I | X Director X Officer (give below) | | % Owner her (specify | |
| AVENUE | | | | | | | | | |
| | (Street) | | . If Amendment, iled(Month/Day/Y | - | al | 6. Individual or Jo Applicable Line) _X_ Form filed by 0 | | | |
| SUMMIT, | NJ 07901 | | | | | Form filed by M Person | fore than One R | Reporting | |
| (City) | (State) | (Zip) | Table I - Nor | -Derivativ | e Securities A | Acquired, Disposed of | f, or Beneficia | ally Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | Execution Da any | Code Year) (Instr. 8) | | d (A) or d of (D) | SecuritiesFBeneficially(Owned(| 5. Ownership Form: Direct D) or Indirect I) Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| Reminder: Re | eport on a separate line | e for each class | s of securities ber | neficially ov | vned directly of | or indirectly. | | | |
| | | | | infor requi | mation cont ired to respe ays a curre | spond to the collec tained in this form ond unless the for ntly valid OMB con | are not n | SEC 1474 (9-02) | |
| | Tab | | ive Securities A its, calls, warrar | | | Beneficially Owned securities) | | | |
| | | saction Date 3 /Day/Year) I | 3A. Deemed Execution Date, i | 4. f Transac | 5. Number tiorDerivative | | | 7. Title and Amount of Underlying Securities | 8 |

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| Security (Instr. 3) | or Exercise Price of Derivative Security | | any (Month/Day/Year) | Code Securities (Instr. 8) Acquired (A) or Disposed o (D) (Instr. 3, 4, and 5) | | (A) ed of | (Month/Day/Year) f | | (Instr. 3 and 4) | | S (|
|--------------------------------------|---|------------|-------------------------|---|--------|--------------|-----------------------|--------------------|------------------|-------------------------------------|--------|
| | | | | Code V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | |
| Stock Option (right to buy) | \$ 113.18 | 01/30/2017 | | А | 18,543 | | <u>(1)</u> | 01/30/2027 | Common Stock | 18,543 | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|--|---------------|-----------|-------------|-------|--|--|--|
| | Director | 10% Owner | Officer | Other | | | |
| FOUSE JACQUALYN A C/O CELGENE CORPORATION 86 MORRIS AVENUE SUMMIT, NJ 07901 | Х | | see remarks | | | | |
| Signatures | | | | | | | |
| /s/ Peter N. Kellogg, Attorney-in-Fact | 0 | 1/31/2017 | | | | | |
| **Signature of Reporting Person | | Date | | | | | |
| Evaluation of Responses: | | | | | | | |

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) Option is immediately exercisable and will vest in four equal annual installments commencing on January 30, 2018.
- (2) The option was issued pursuant to the Company's 2008 Stock Incentive Plan (as Amended and Restated as of April 15, 2015).

Remarks:

President & Chief Operating Officer

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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