Edgar Filing: ACETO CORP - Form 4

| ACETO CORF |) | | | | | | | | | | |
|---|---------------------------------------|---|---|-----------------------|-------------|-----------|----------------|--|------------------------|-------------------------|--|
| Form 4 | | | | | | | | | | | |
| December 08, 2 | 2015 | | | | | | | | | | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION | | | | | | | | OMB APPROVAL | | | |
| | • UNITE | ED STATE | | | | | GE CO | OMMISSION | OMB | 3235-0287 | |
| Check this h | Check this box Washington, D.C. 20549 | | | | | | | Number: | January 31, | | |
| if no longer | | | | | DIFFIC | TAT | OWN | | Expires: | 2005 | |
| subject to | SIAI | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHI | | | | | | ERSHIP OF | Estimated average | | |
| Section 16. Form 4 or | | SECURITIES | | | | | | | burden hours per | | |
| Form 5 | Filed | Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, | | | | | | | response | 0.5 | |
| obligations | | ^ | | | | | • | 1935 or Section | | | |
| may continu | le. | | n) of the Inve | • | • | | | | L | | |
| See Instruct 1(b). | ion | 50(1 | i) of the mye | istinent C | ompany | 1101 0 | 51 1740 | J | | | |
| 1(0). | | | | | | | | | | | |
| (Print or Type Res | sponses) | | | | | | | | | | |
| 1 Name and Add | rass of Dapart | ing Damon * | | | | | | 5 Delationship of | Poporting Dars | on(s) to | |
| 1. Name and Add Shackley Nicc | | | | lame and T | icker or Ti | rading | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| • | | | | | OFTI | | | | | | |
| | ACEIOC | ACETO CORP [ACET] | | | | | all applicable |) | | | |
| (Last) | (First) | (Middle) | 3. Date of E | | saction | | | | | | |
| 4 TRI HARBOR COURT (Month/Da 12/08/20 | | | | th/Day/Year) | | | | Director 10% Owner X Officer (give title Other (specify | | | |
| | | | | 5 | | | | below) below) | | | |
| | | | | | | | | SENIOR V | /ICE PRESID | ENT | |
| (Street) 4. If Amen Filed(Mont | | | | ndment, Date Original | | | | 6. Individual or Joint/Group Filing(Check | | | |
| | | | | /Day/Year) | | | | Applicable Line) | | | |
| DODENIAGU | NGTON | | | | | | | _X_ Form filed by O Form filed by M | | | |
| PORT WASH | INGTON, I | NY 11050 | | | | | | Person | | Johning | |
| (City) | (State) | (Zip) | Table l | I - Non-Der | ivative Se | ecuriti | es Acqu | iired, Disposed of, | or Beneficiall | y Owned | |
| 1.Title of | 2. Transactio | n Date 2A. I | Deemed | 3. | 4. Securi | ties A | cquired | 5. Amount of | 6. | 7. Nature of | |
| Security | (Month/Day/ | Year) Exec | • | | | d of | Securities | Ownership | Indirect | | |
| (Instr. 3) | | any | | | | 4 | 5) | • | Form: Direct | | |
| | | (MOI | th/Day/Year) (Instr. 8) (Instr. 3, 4 and 5) | | | | 5) | Owned Following | (D) or Indirect (I) | Ownership (Instr. 4) | |
| | | | | | | | | Reported | (Instr. 4) | (1110417-1) | |
| | | | | | | (A) or | | Transaction(s) | | | |
| | | | | Code V | Amount | | Price | (Instr. 3 and 4) | | | |
| COMMON | 12/08/2013 | 5 | | S | 3,000 | D | \$ | 24,278 | D | | |
| STOCK | 12/00/201. | 5 | | 5 | 5,000 | D | 26.7 | 24,270 | 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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

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| 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. Transacti Code (Instr. 8) | 5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | ; | ate | 7. Titl Amou Under Secur (Instr. | ınt of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr |
|---|---|---|---|---------------------------------------|---|---------------------|--------------------|--|--|---|--|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Nan | me / Address | Relationships | | | | | | |
|--|--------------|---------------|-----------|-----------------------|-------|--|--|--|
| | | Director | 10% Owner | Officer | Other | | | |
| Shackley Nicolas I 4 TRI HARBOR COU PORT WASHINGTO | | | | SENIOR VICE PRESIDENT | | | | |
| Signatures | | | | | | | | |
| Nicholas Shackley | 12/08/20 | 015 | | | | | | |
| **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).

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.