HERSCHKOWITZ SAMUEL /FA/

Form 4

February 04, 2005

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL OMB

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Check this box

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).

value \$0.01

(Print or Type Responses)

1. Name and Address of Reporting Person * HERSCHKOWITZ SAMUEL /FA/				2. Issuer Name and Ticker or Trading Symbol DELCATH SYSTEMS INC [DCTH]				5. Relationship of Reporting Person(s) to Issuer			
			CTH]					(Check all applicable)			
	(Last)	(First) (M	Middle)	3. Date of	Earliest Tra	nsaction					
		TH SYSTEMS UMMER STRE	ET	(Month/Da) 02/03/20	•				_X_ Director _X_ Officer (give below)		
(Street) STAMFORD, CT 06905				4. If Amendment, Date Original Filed(Month/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			
									Person		
	(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	ecurit	ies Acq	uired, Disposed of	f, or Beneficial	ly Owned
	1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Executio any	med n Date, if Day/Year)	3. Transactio Code (Instr. 8)	4. Securiti n(A) or Dis (Instr. 3, 4)	posed	of (D)	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, par	02/03/2005			M	30,000	A	\$ 0.85	60,000	D	

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)

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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. 5. Number of TransactionDerivative Code Securities (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Incentive Stock Option (right to buy)	\$ 3.3125	12/01/2000		J <u>(1)</u>	30,150	(2)	12/01/2005	Common Stock	30,150
Incentive Stock Option (right to buy)	\$ 3.3125	01/01/2001		J <u>(1)</u>	30,150	(2)	01/01/2006	Common Stock	30,150
Incentive Stock Option (right to buy)	\$ 3.3125	12/17/2001		J <u>(1)</u>	30,000	(2)	12/17/2006	Common Stock	30,000
Incentive Stock Option (right to buy)	\$ 1.03	08/25/2003		J <u>(1)</u>	90,000	(3)	08/25/2008	Common Stock	90,000
Incentive Stock Option (right to buy)	\$ 0.85	02/03/2005		X	30,000	<u>(4)</u>	09/19/2007	Common Stock	30,000

Reporting Owners

Reporting Owner Name / Address	Keiationsnips						
	Director	10% Owner	Officer	Other			
HERSCHKOWITZ SAMUEL /FA/							
C/O DELCATH SYSTEMS INC	X		Chief Technical Officer				
1100 SUMMER STREET			Chief Technical Officer				
STAMFORD CT 06905							

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Signatures

SAMUEL HERSCHKOWITZ, By /s/ PAUL G. HUGHES, Attorney-in-Fact

02/04/2005

**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).
- (1) This transaction was previously reported.
- (2) Currently exercisable.
- (3) Exercisable as to 50% on each of the first and second anniversaries of the date of grant.
- (4) This is the option that was exercised.

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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