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PSYCHEMI	EDICS CORP										
Form 4											
November 2											
	FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							COMMISSION	OMB AF OMB Number:	3235-028	
Check this box if no longer subject to Section 16. SECURITIES								Expires: Estimated a burden hou response	January 31, 2005 d average ours per		
(Print or Type]	Responses)										
Lerner Neil Symbol			Symbol	r Name and Ticker or Trading IEMEDICS CORP [PMD]			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last)	(First)	(Middle)	3. Date of E	Earliest Tra	ansaction			(Cnec.	к ап аррпсабіе	;)	
	HEMEDICS .TION, 125 NA	AGOG	(Month/Day 11/18/201					Director X Officer (give below) V		Owner er (specify	
				ndment, Date Original hth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
ACTON, M	IA 01720							Form filed by M Person	Iore than One Re	porting	
(City)	(State)	(Zip)	Table	I - Non-De	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	Security (Month/Day/Year) Execution Date, if			3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)			d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common			(Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Stock, \$.005 Par Value	11/18/2016			S	3,000	D	\$ 24.75	25,722	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)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration D (Month/Day, e	6. Date Exercisable and Expiration Date (Month/Day/Year)		le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Lerner Neil C/O PSYCHEMEDICS CORPORATION 125 NAGOG PARK ACTON, MA 01720			VP - Finance				
Signatures							
Patrick J. Kinney, Jr. as attorney-in-fact for Lerner	Neil	11/	/21/2016				
<u>**</u> 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.