#### **PSYCHEMEDICS CORP**

Form 4 March 13, 2017

## FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

OMB 33

Number: 3235-0287

**OMB APPROVAL** 

Expires: January 31, 2005
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Check this box if no longer subject to Section 16. Form 4 or Form 5

Form 4 or
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).

(Print or Type Responses)

1. Name and A Dyke Jame	Address of Reporting l s V.	Symbol	2. Issuer Name and Ticker or Trading Symbol PSYCHEMEDICS CORP [PMD]				5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)				
(Last)	(First) (N		3. Date of Earliest Transaction (Month/Day/Year)				Director 10% Owner				
C/O PSYC	HEMEDICS	03/09/2	•				Officer (give		er (specify		
	ATION, 125 NAGO		.017				below) Vice	below) President - Sale	8		
	(Street)		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				
ACTON, M	IA 01720						Form filed by N Person	More than One Re	porting		
(City)	(State)	(Zip) Tab	le I - Non-D	Perivative S	Securi	ties Acqu	uired, Disposed of	f, or Beneficial	y Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr. 3, 4 and 5)				5. Amount of Securities Ownership Indirect Beneficially Form: Direct Beneficially Owned (D) or Ownership Indirect (I) (Instr. 4) Reported (Instr. 4) Transaction(s) (Instr. 3 and 4)				
Common Stock, \$.005 Par Value	03/09/2017		S	10,513	D	\$ 20.56 (1)	17,050	D			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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SEC 1474

(9-02)

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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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title	and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration D	ate	Amoun	t of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underly	ying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securit	ies	(Instr. 5)	Bene
	Derivative				Securities			(Instr. 3	3 and 4)		Own
	Security				Acquired						Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									A manuat		
									Amount		
						Date	Expiration		Or Number		
						Exercisable	Date	Title Number	Number		
				C + V	(A) (D)						
				Code V	(A) (D)				Shares		

## **Reporting Owners**

Relationships Reporting Owner Name / Address

> Officer Other Director 10% Owner

Dyke James V. C/O PSYCHEMEDICS CORPORATION 125 NAGOG PARK **ACTON, MA 01720** 

Vice President - Sales

## **Signatures**

Patrick J. Kinney, Jr. as attorney-in-fact for James V. Dyke

03/13/2017

\*\*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).

The price reported in Column 4 is a weighted average price. The shares were sold in multiple transactions at prices ranging from \$20.25 to \$20.87, inclusive. The reporting person undertakes to provide to Psychemedics Corp., any security holder of Psychemedics Corp., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within such range.

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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