

JACOB GARY S
Form 3
January 24, 2012

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type Responses)

1. Name and Address of Reporting Person *

Â JACOB GARY S
(Last) (First) (Middle)

C/O SYNERGY
PHARMACEUTICALS,
INC., Â 420 LEXINGTON
AVENUE, SUITE 1609

(Street)

NEW YORK, Â NY Â 10170

(City) (State) (Zip)

2. Date of Event Requiring Statement

(Month/Day/Year)
01/23/2012

3. Issuer Name and Ticker or Trading Symbol
TrovaGene Inc. [TROV]

4. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

Director 10% Owner
 Officer Other
(give title below) (specify below)

5. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)
 Form filed by One Reporting Person
 Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)

Common Stock

2. Amount of Securities Beneficially Owned (Instr. 4)

738,000

3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)

D Â

4. Nature of Indirect Beneficial Ownership (Instr. 5)

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

SEC 1473 (7-02)

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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)

2. Date Exercisable and Expiration Date (Month/Day/Year)

3. Title and Amount of Securities Underlying Derivative Security

4. Conversion or Exercise

5. Ownership Form of

6. Nature of Indirect Beneficial Ownership

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	Date Exercisable	Expiration Date	(Instr. 4) Title	Amount or Number of Shares	Price of Derivative Security	Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	(Instr. 5)
Stock Options	03/21/2005	03/21/2015	Common Stock	50,000	\$ 1.25	D	Â
Stock Options	10/07/2009	10/07/2019	Common Stock	300,000	\$ 0.5	D	Â
Stock Options	Â ⁽¹⁾	02/26/2020	Common Stock	50,000	\$ 0.6	D	Â
Stock Options	02/26/2010	02/26/2020	Common Stock	5,000	\$ 0.6	D	Â
Warrants	01/06/2011	12/31/2018	Common Stock	63,000	\$ 0.5	D	Â

Reporting Owners

Reporting Owner Name / Address

Relationships

Director 10% Owner Officer Other

JACOB GARY S
C/O SYNERGY PHARMACEUTICALS, INC.
420 LEXINGTON AVENUE, SUITE 1609
NEW YORK, NY 10170

Â X Â Â Â

Signatures

/s/ Gary S. Jacob 01/23/2012

 Signature of
Reporting Person

Date

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 5(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) 16,667 options vest on each of 2/26/2011 and 2012 and 16,666 options vest on 2/26/2013.

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.