Edgar Filing: EPIX Pharmaceuticals, Inc. - Form 4

EPIX Pharr	naceuticals, Inc.										
Form 4											
June 29, 20											
FORM	Л 4		GEGU	DIFIE					PPROVAL		
	UNITED	STATES			AND EX(1, D.C. 20		COMMISSION	OMB Number:	3235-0287		
Check t								Expires:	January 31,		
if no lo subject		MENT O	F CHAI			ICIAL O	WNERSHIP OF	Estimated	2005 average		
Section 16. SECURITIES								burden hou	•		
Form 4 Form 5	Form 4 or								. 0.5		
obligati							nge Act of 1934,				
may con	ntinue. Section 170			•	•	· ·	of 1935 or Section	on			
See Inst	ruction	30(n)	of the f	nvestmen	t Compan	y Act of 1	940				
1(b).											
(Print or Type	Responses)										
1. Name and	Address of Reporting	Person *	2 Icen	er Name an	d Ticker or	Trading	5. Relationship of	of Reporting Per	rson(s) to		
	erger Mark		Symbol		u Hekel of	Trading	Issuer				
8			•	Pharmace	uticals. In	c. [EPIX]					
(Last) (First) (Middle)			3. Date of Earliest Transaction				(Check all applicable)				
(Lust)	(1130)	(vildule)	(Month/Day/Year)				X Director	109	% Owner		
C/O EPIX PHARMACEUTICALS,			06/27/2007				Officer (give title Other (specify				
INC., 4 M.	AGUIRE ROAD						below)	below)			
(Street)			4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
				onth/Day/Yea	-		Applicable Line)				
					X Form filed by One Reporting Person Form filed by More than One Reporting						
LEXINGT	ON, MA 02421						Person	wore than one R	epotting		
(City)	(State)	(Zip)	Tal	ole I - Non-	Derivative	Securities A	cquired, Disposed o	of, or Beneficia	lly Owned		
1.Title of	2. Transaction Date	2A. Deem	ed	3.	4. Securiti	es	5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year)	Execution	Date, if		onAcquired			Form: Direct	Indirect		
(Instr. 3)		any (Month/Da	Code Disposed of (ay/Year) (Instr. 8) (Instr. 3, 4 ar				•	(D) or Indirect (I)	Beneficial Ownership		
			ay/ I cal)	(111501.0)	(111501. 5, 4	and J)		(I) (Instr. 4)	(Instr. 4)		
						(A)	Reported				
						or	Transaction(s) (Instr. 3 and 4)				
				Code V	Amount	(D) Price	(IIISU: 5 and 4)				
Reminder: Re	port on a separate line	e for each cl	ass of sec	urities bene	ficially own	ned directly	or indirectly.				
					Perso	ns who res	spond to the colle		SEC 1474		
							ained in this form		(9-02)		
							ond unless the for ntly valid OMB co				
					numb		.,				

 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. Number of	6. Date Exercisable and	7. Title and Amount of	8
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities	D
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	S

(Instr. 3)	Price of Derivative Security	(Month/Day/Year) (In		Instr. 8)	or Dispose (D)	(Instr. 3, 4,				(
			C	Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (right to buy)	\$ 5.2	06/27/2007		A	10,000		<u>(1)</u>	06/27/2017	Common Stock	10,000

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Leuchtenberger Mark C/O EPIX PHARMACEUTICALS, INC. 4 MAGUIRE ROAD LEXINGTON, MA 02421	Х						
Signatures							
/s/ Kimberlee Drapkin, Attorney-in-Fact	06/29/2007						
**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) The stock option vests in full on the earlier of (i) the first anniversary date of the grant or (ii) the date of EPIX Pharmaceuticals, Inc.'s next annual meeting, in each case provided that the optionee is still a director of EPIX Pharmaceuticals, Inc. on such date.

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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