Cochran Stanley Robert Form 4 April 02, 2019

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

3235-0287

Expires:

January 31, 2005

0.5

Estimated average burden hours per

OMB APPROVAL

response...

if no longer subject to Section 16. Form 4 or Form 5

Check this box

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction

1(b).

(Last)

(Print or Type Responses)

1. Name and Address of Reporting Person *

(First)

Cochran Stanley Robert

2. Issuer Name and Ticker or Trading

Symbol

5. Relationship of Reporting Person(s) to Issuer

PERMA FIX ENVIRONMENTAL

SERVICES INC [PESI]

3. Date of Earliest Transaction

(Month/Day/Year)

(Check all applicable) X_ Director 10% Owner

Officer (give title Other (specify below)

8302 DUNWOODY PLACE, SUITE 04/01/2019

(Middle)

250

(Instr. 3)

(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 Form filed by More than One Reporting

Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

ATLANTA, GA 30350

(City) (State) (Zip) 2. Transaction Date 2A. Deemed 1. Title of Security (Month/Day/Year) Execution Date, if

(Month/Day/Year)

3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)

5. Amount of Securities Beneficially Owned Following

6. 7. Nature of Ownership Indirect Form: Direct Beneficial (D) or Ownership Indirect (I) (Instr. 4)

Reported (Instr. 4)

Transaction(s)

Code V Amount (D) Price

(A)

(Instr. 3 and 4)

Common 04/01/2019 Stock

3,799 A

28,557 2.6325

D

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

Persons who respond to the collection of SEC 1474 information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

(9-02)

Edgar Filing: Cochran Stanley Robert - Form 4

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. Transactic Code (Instr. 8)	5. DrNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration (Month/I	on D		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price Derivat Security (Instr. 5
				Code V	(A) (D)	Date Exercisa	ıble	Expiration Date	Title	Amount or Number of Shares	
Stock Option	\$ 3.795					<u>(1)</u>		01/13/2027	Common Stock	6,000	
Stock Option	\$ 3.55					(2)		07/27/2027	Common Stock	2,400	
Stock Option	\$ 4.3					(3)		07/26/2028	Common Stock	2,400	

Reporting Owners

Reporting Owner Name / Address	Keiationsnips						
	Director	10% Owner	Officer	Other			
Cochran Stanley Robert 8302 DUNWOODY PLACE SUITE 250 ATLANTA, GA 30350	X						

Signatures

/s/ Stanley R.
Cochran

_**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) Non-Qualified Stock Option granted 01/13/17 under the Company's 2003 Outside Directors Stock Plan. The Options vest fully six months from date of grant.
- (2) Non-Qualified Stock Option granted 07/27/17 under the Company's 2003 Outside Directors Stock Plan. The Options vest fully six months from date of grant.
- (3) Non-Qualified Stock Option granted 07/26/18 under the Company's 2003 Outside Directors Stock Plan. The Options vest fully six months from date of grant.

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.

Reporting Owners 2