ChemoCentryx, Inc. Form 4 June 19, 2013

FORM 4

OMB APPROVAL

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

OMB 3235-0287

Check this box if no longer subject to Section 16.

Number:

January 31, Expires: 2005

Form 4 or Form 5 obligations STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Estimated average burden hours per response...

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

0.5

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * Bekker Petrus

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to Issuer

(Last)

(City)

(Middle)

(Zip)

ChemoCentryx, Inc. [CCXI] 3. Date of Earliest Transaction

(Check all applicable)

C/O CHEMOCENTRYX, INC., 850

(First)

(Month/Day/Year)

Director 10% Owner X_ Officer (give title Other (specify

06/17/2013

below)

MAUDE AVENUE

SVP of Medical & Clinical

(Street)

(State)

4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check

Filed(Month/Day/Year)

Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting

Person

n Denivotive Committee Acquired Disposed of an Deneficially Or

MOUNTAIN VIEW, CA 94043

(,)	(= :)	Table 1 - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									
1.Title of Security	2. Transaction Date (Month/Day/Year)	2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if			4. Securities Acquired (A) 5. Amount of our Disposed of (D) Securities				7. Nature of Indirect		
(Instr. 3)	•	any	Code (Instr. 3, 4 and 5)			Beneficially	Form:	Beneficial			
		(Month/Day/Year)	(Instr. 8)		(A) or		Owned Following Reported Transaction(s) (Instr. 3 and 4)	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)		
			Code V	Amount	(D)	Price	(Instr. 5 und 1)				
Common Stock	06/17/2013		M	5,000	A	\$ 6	58,594	D			
Common Stock	06/17/2013		S <u>(1)</u>	5,000	D	\$ 12.0002 (2)	53,594	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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number out Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amoun or Number of Shares
Employee Stock Option (right to buy)	\$ 6	06/17/2013		M	5,000	07/28/2009(3)	07/28/2019	Common Stock	5,000

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

SVP of Medical & Clinical

Bekker Petrus

C/O CHEMOCENTRYX, INC.

850 MAUDE AVENUE

MOUNTAIN VIEW, CA 94043

Signatures

/s/ Michael Sullivan, as Attorney-in-Fact 06/19/2013

**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 sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person.
- (2) Reflects the weighted average sale price of the shares sold. 4,944 shares were sold at \$12.00 per share and 56 shares were sold at \$12.02 per share.
- (3) As of June 17, 2013 and prior to this transaction, the option fully vested.
- (4) Not applicable.

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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