**CROSS HERB** Form 4 April 06, 2009

# FORM 4

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

Check this box if no longer

subject to Section 16. Form 4 or

Form 5 obligations may continue.

See Instruction

**SECURITIES** Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

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 Address of Reporting Person \*

**CROSS HERB** 

(Last)

(First) (Middle)

1400 SEAPORT BLVD

(Street)

REDWOOD CITY, CA 94063

2. Issuer Name and Ticker or Trading

Symbol

FACET BIOTECH CORP [FACT] 3. Date of Earliest Transaction

(Month/Day/Year)

04/02/2009

4. If Amendment, Date Original

Filed(Month/Day/Year)

Applicable Line)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

(I)

(Instr. 4)

6. Individual or Joint/Group Filing(Check

6. Ownership

Form: Direct

(D) or Indirect Beneficial

5. Relationship of Reporting Person(s) to

(Check all applicable)

below) Corp Controller/Prin Acctg Off

10% Owner

Other (specify

7. Nature of

Ownership

(Instr. 4)

Indirect

**OMB APPROVAL** 

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Number:

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response...

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Person

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

Issuer

below)

Director

X\_ Officer (give title

(City) (State)

1. Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year) (Instr. 3)

Execution Date, if (Month/Day/Year)

(Zip)

3. 4. Securities TransactionAcquired (A) or Code (Instr. 8)

Disposed of (D) (Instr. 3, 4 and 5)

(A)

Beneficially Owned Following Reported Transaction(s)

5. Amount of

Securities

(Instr. 3 and 4) Code V Amount (D) Price

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 (9-02)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)

1. Title of Derivative Security

Conversion or Exercise 3. Transaction Date 3A. Deemed (Month/Day/Year) Execution Date, if

any

4. 5. Number Transaction Derivative Securities Code

6. Date Exercisable and **Expiration Date** (Month/Day/Year)

7. Title and Amount Underlying Securitie (Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr.	8)	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)					
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Non-Qualified Stock Option (right to buy)	\$ 9.55	04/02/2009		A		6,866		<u>(1)</u>	04/02/2016	Common Stock	6,86

### **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

CROSS HERB Corp

1400 SEAPORT BLVD Controller/Prin REDWOOD CITY, CA 94063 Acctg Off

## **Signatures**

/s/ Herb Corss 04/06/2009

\*\*Signature of Date
Reporting Person

# **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 shares subject to this option were determined based on the Black-Scholes value of the vested PDL options that Mr. Cross forfeited as a result of the spin-off of Facet Biotech in December 2008. These options were immediately vested at the time of grant. The Company's

(1) intent to grant these options, the expected terms of these grants and the method by which the number of shares was to be calculated were disclosed in the Re-Engagement Grants section of the Information Statement attached to the Registration Statement on Form 10 the Company originally filed with the Securities and Exchange Commission on August 13, 2008 in conjunction with the spin-off.

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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