GERON CORP Form 4 May 10, 2017

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 1(b).

STATEMENT OF CHANGES IN 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 *

EASTHAM KARIN

(First) (Middle)

C/O GERON CORPORATION, 149 COMMONWEALTH DRIVE. **SUITE 2070**

(City)

1. Title of

Security

(Instr. 3)

(Last)

(Street)

(Zip)

MENLO PARK, CA 94025

(State)

2. Issuer Name and Ticker or Trading

Symbol

GERON CORP [GERN]

3. Date of Earliest Transaction

(Month/Day/Year) 05/09/2017

4. If Amendment, Date Original

Filed(Month/Day/Year)

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

2. Transaction Date 2A. Deemed 3. 4. Securities (Month/Day/Year) Execution Date, if TransactionAcquired (A) or Code Disposed of (D) (Month/Day/Year) (Instr. 8)

(Instr. 3, 4 and 5)

Reported (A) or

Transaction(s) (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 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)

3. Transaction Date 3A. Deemed 1. Title of (Month/Day/Year) Execution Date, if Derivative Conversion

5. Number of TransactionDerivative

6. Date Exercisable and **Expiration Date**

7. Title and Amount of 8 Underlying Securities

OMB APPROVAL

3235-0287

January 31,

2005

0.5

OMB

Number:

Expires:

response...

5. Relationship of Reporting Person(s) to

6. Individual or Joint/Group Filing(Check

6. Ownership

Form: Direct

X Form filed by One Reporting Person Form filed by More than One Reporting

(I)

(Instr. 4)

(Check all applicable)

10% Owner

Other (specify

7. Nature of

Ownership (Instr. 4)

Indirect

SEC 1474

(9-02)

(D) or Indirect Beneficial

Issuer

below)

X_ Director

Applicable Line)

5. Amount of

Securities

Following

Owned

Beneficially

Officer (give title

Estimated average

burden hours per

1

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| Security (Instr. 3) | or Exercise Price of Derivative Security | (Month/Day/Year) (Instr. 8) Acquired (A) | | (Month/Day, | /Year) | (Instr. 3 and | 4) | | | |
|-----------------------------|---|--|--|-------------|--------|---------------|---------------------|--------------------|-----------------|-------------------------------------|
| | | | | Code ' | / (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares |
| Stock Option (right to buy) | \$ 2.63 | 05/09/2017 | | A | 50,000 |) | <u>(1)</u> | 05/09/2027 | Common Stock | 50,000 |

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

EASTHAM KARIN
C/O GERON CORPORATION
149 COMMONWEALTH DRIVE, SUITE 2070
MENLO PARK, CA 94025

Signatures

/s/ Olivia Bloom for Karin Eastham

05/10/2017

**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).

This option will vest and become exercisable as to 100% of the shares of common stock subject to such option on the earlier of (i) the (1) date of the next annual meeting of the company's stockholders or (ii) the first anniversary of the date of grant of such option, subject to the non-employee director's continuous service with the company through such dates.

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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