## Edgar Filing: NEWMAN MARK J - Form 4

NEWMAN I	MARK J											
Form 4												
June 14, 201	0											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION										OMB APPROVAL		
<b>CURIVI 4</b> UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									OMB Number:	3235-0287		
Check th				8,						January 31,		
if no long		EMENT O	F CHAN	GES IN I	BENEFI	[CIA	LOW	NERSHIP OF	Expires:	2005		
subject to Section 16. STATEMENT OF CHANGES IN BENEFICIAL OWNERS									Estimated a	~		
Form 4 o				~~~~					burden hou response	•		
Form 5		pursuant to	Section 10	6(a) of the	e Securit	ies E	xchang	ge Act of 1934,	16300136	0.5		
obligatio	ns Section	•					-	f 1935 or Sectio	n			
may cont	inue.		) of the In	•	•	· ·						
See Instru 1(b).	uction	50(11)	, or the m	vestment	compun	<i>y</i> 110	. 01 17	10				
1(0).												
(Print or Type I	Responses)											
	ddress of Repor	ting Person <sup>*</sup>	2. Issuer	Name and Ticker or Trading				5. Relationship of Reporting Person(s) to				
NEWMAN	MARK J		Symbol					Issuer				
			GeoVax	GeoVax Labs, Inc. [GOVX.OB]				(Check all applicable)				
(Last)	(First)	(Middle) 3. Date of Earliest Transaction					(Chec	k an applicable	2)			
			(Month/D	(Month/Day/Year)				Director 10% Owner				
C/O GEOV	AX LABS, IN	NC., 1900	06/11/20	-				Officer (give title Other (specify				
LAKE PARK DR., SUITE 380					below) VP Reserved	below) arch & Develoj	oment					
	(Street)			endment, Date Original				6. Individual or Joint/Group Filing(Check				
Filed(Month/Day/Year)					Applicable Line) _X_ Form filed by One Reporting Person							
						Aore than One R						
51411111111	0/1 50000							Person				
(City)	(State)	(Zip)	Table	e I - Non-D	erivative	Secur	ities Ace	quired, Disposed o	f, or Beneficia	lly Owned		
1.Title of	2. Transaction	Date 2A. Dee	emed	3.	4. Securi	ties A	cquired	5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Y	Year) Executi	on Date, if	Transaction(A) or Disposed of			Securities	Form: Direct Indirect	Indirect			
(Instr. 3)		any		Code	(D)		<b>~</b> )	Beneficially	(D) or	Beneficial		
	Day/Year) (Instr. 8) (Instr. 3, 4 and 5)				5)	Owned Following	Indirect (I) (Instr. 4)	Ownership (Instr. 4)				
								Reported	(Instr. 1)	(insu: i)		
						(A)		Transaction(s)				
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)				
Common	0.6.11.1.10.0.1.0						\$	1 000	D			
Stock	06/11/2010			Р	1,000	А	3.25	1,000	D			
							¢					
Common	06/11/2010			Р	2,000	А	\$ 3.32	3,000	D			
Stock							3.32					

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.

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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)	4. Transactio Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Addı	ess	Relationships							
	Director	10% Owner	Officer	Other					
NEWMAN MARK J C/O GEOVAX LABS, INC. 1900 LAKE PARK DR., SUIT SMYRNA, GA 30080	E 380		VP, Research & Development						
Signatures									
/s/ Mark J. 06 Newman 06	5/14/2010								

\*\*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).

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.