NOVAGOLD RESOURCES INC

Form 4 April 06, 2015

FORM 4

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

OMB APPROVAL OMB

3235-0287 Number: January 31,

Expires:

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10% Owner

Check this box if no longer subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Form 5 obligations 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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * **Deisley David**

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to Issuer

03/31/2015

NOVAGOLD RESOURCES INC

(Check all applicable)

Exec. VP & General Counsel

[NG]

(Middle)

(Zip)

(Last) (First) 3. Date of Earliest Transaction (Month/Day/Year)

Other (specify Officer (give title below)

Director

C/O NOVAGOLD RESOURCES INC., 201 SOUTH MAIN STREET,

(Street)

(State)

03/31/2015

SUITE 400

(City)

Common

Shares

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check

Applicable Line)

SALT LAKE CITY, UT 84111

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

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1.Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year) Execution Date, if (Instr. 3) (Month/Day/Year)

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

6. Ownership 7. Nature of Form: Direct Indirect Securities Beneficially (D) or Beneficial Owned Indirect (I) Ownership Following (Instr. 4) (Instr. 4) Reported

D

(A) Transaction(s) (Instr. 3 and 4) Price

Code V Amount (D)

\$ 3.55 882,367

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	2.	3. Transaction Date	3A. Deemed	4.	5. 6. Date Exercisable and		7. Title and		8. Price of	9	
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	TransactionNumber		Expiration Date A		Amour	nt of	Derivative	J
Security	or Exercise		any	Code	of	(Month/Day/Year)		Underlying		Security	5
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	2		Securit	ies	(Instr. 5)]
	Derivative		Securities			(Instr.		(
	Security				Acquired (A) or						J
											J
		Disposed								-	
					of (D) (Instr. 3,						(
					4, and 5)						
									Amount		
									or		
						Date Expiration			Number		
						Exercisable Date	Date		of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address

Relationships

Director 10% Owner Officer Other

Deisley David C/O NOVAGOLD RESOURCES INC. 201 SOUTH MAIN STREET, SUITE 400 SALT LAKE CITY, UT 84111

Exec. VP & General Counsel

9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

Signatures

/s/ Tricia Pannier as attorney-in-fact for David
Deisley

04/06/2015

**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) Represents shares acquired under the NOVAGOLD RESOURCES INC. Employee Stock Purchase Plan during the first calendar quarter of 2015.
- The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions over a three-month period at prices ranging from \$2.90 to \$4.04, inclusive. The reporting person undertakes to provide to NOVAGOLD RESOURCES INC, any security holder of NOVAGOLD RESOURCES INC., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price within the ranges set forth in this footnote.

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