## Edgar Filing: O'Loughlin Steve - Form 4

O'Loughlin S	steve										
Form 4	2019										
December 10	Л								OMB AF	PROVAL	
	FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMMISSION	OMB Number:	3235-0287	
Check thi if no long subject to Section 10 Form 4 or Form 5	F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Section 16(a) of the Securities Exchange Act of 1934,						January 31Expires:2005Estimated averageburden hours perresponse0.5				
obligations may continue.Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 19401(b).											
(Print or Type R	lesponses)										
1. Name and Address of Reporting Person <u>*</u> O'Loughlin Steve			2. Issuer Name <b>and</b> Ticker or Trading Symbol					5. Relationship of Reporting Person(s) to Issuer			
		Actinium Pharmaceuticals, Inc. [ATNM]					(Check all applicable)				
(Last) C/O ACTIN PHARMAC MADISON	3. Date of Earliest Transaction (Month/Day/Year) 12/10/2018					Director       10% Owner         X Officer (give title       Other (specify below)         below)       below)         Principal Financial Officer					
				ndment, Da hth/Day/Year)	-			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
NEW YORF	K, NY 10016							Form filed by M Form filed by M Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Securi	ties Acq	uired, Disposed of	, or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)		n Date, if	3. Transactio Code (Instr. 8)	(Instr. 3, 4	sposed and 5 (A) or	of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	12/10/2018			Code V P	Amount 10,000	(D) A	Price \$ 0.435	35,500	D		

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)

## Edgar Filing: O'Loughlin Steve - Form 4

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>		Relationships							
For8 o m		Director	10% Owner	Officer	Other				
O'Loughlin Steve C/O ACTINIUM PHARM 275 MADISON AVENU NEW YORK, NY 10016			Principal Financial Officer						
Signatures									
/s/ Steve	10/10/2010								
O'Loughlin	12/10/2018								
<u>**</u> 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.