FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | |
| Estimated average burden | | | | | | | | |
| hours per response: | 0.5 | | | | | | | |

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* Palmieri Valerie Barber | | | | | 2. Issuer Name and Ticker or Trading Symbol VERMILLION, INC. [VRML] | | | | | | | | | k all applica | Reporting Perso ble) | | n(s) to Issu 10% Ow | | |
|---|---|--|--|------------|--|--|-------|---------------------------------------|---|---------|--|---|---|---|---|-------------------------|--|-------------------------------------|--|
| (Last) | (F | irst) | (Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 03/23/2017 | | | | | | | | | Officer (g below) | ive title | | Other (s below) | pecify | |
| 12117 BI | | | | | | | | | | Preside | lent and Chief E | | Executiv | e | | | | | |
| (Street) | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | | | | | |
| AUSTIN | T. | X | 78738 | | | | | | | | | | | | | | | | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | Form filed by More than One Reporting Person | | | | ting | |
| | | Table I | - Non-D | erivati | ive Se | curit | ies A | ۱cq | uired, | Dis | posed | of, or E | Benefic | ially Ow | ned | | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Date) | | | | | Execution Date, if | | | if Transaction Dispos Code (Instr. | | | ities Acquired (A) or d Of (D) (Instr. 3, 4 and | | 5. Amount Securities Beneficial Owned Fo | ly (| 6. Own Form: (D) or I (I) (Inst | Direct Indirect Itr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | Code | v | Amount | mount (A) or (D) | | Reported Transaction(s) (Instr. 3 and 4) | | | | | |
| | | Tabl | | | | | | - | | - | | | neficia curitie | lly Own s) | ed | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution D any (Month/Day | ate, if Tr | ansactio ode (Inst | n Deriv r. Secu Acqu or Di of (D | 1 | | 6. Date Exercisabl Expiration Date (Month/Day/Year | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported | ly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership ect (Instr. 4) | |
| | | | | c | ode \ | , (A) | (I | - 1 | Oate Exercisable | | oiration te | Title | Amount or Number of Shares | | Transaction(s) | | | | |
| Employee Stock Option (Right to Buy) | \$2.14 | 03/23/2017 | | | D | 450, | 000 | | (1) | 03, | /23/2027 | Common Stock | 450,000 | \$0 | 450,00 | 00 | D | | |

Explanation of Responses:

<u>/s/ Valerie B Palmieri</u> <u>03/27/2017</u>

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * 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.

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 Number.

 $^{{\}it 1. The option vests in four equal annual installments beginning on March 23, 2018.}\\$