# EPSTEIN ROBERT S Form 3 December 20, 2012 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OM

# INITIAL STATEMENT OF 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

#### OMB APPROVAL

OMB Number: 3235-0104 Expires: January 31, 2005 Estimated average burden hours per response... 0.5

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> EPSTEIN ROBERT S			<ol> <li>Date of Event Requiring Statement (Month/Day/Year)</li> </ol>	3. Issuer Name and Ticker or Trading Symbol AVEO PHARMACEUTICALS INC [AVEO]				
(Last)	(First)	(Middle)	12/18/2012	4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)	
C/O AVEO PHARMACEUTICALS, INC., 75 SIDNEY STREET (Street) CAMBRIDGE, MA 02139				(Check all applicable) <u>X</u> Director 10% Owner Officer Other (give title below) (specify below)		Owner 6 w) F	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person	
						_	Form filed by More than One Reporting Person	
(City)	(State)	(Zip)	Table I - I	Non-Derivat	tive Securiti	es Ben	eficially Owned	
1.Title of Secu (Instr. 4)	ırity		2. Amount o Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Natur Owners (Instr. 5		
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 (7-02)								
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.								
r	Fable II De	nivotivo Soon	witing Ronoficially Owned (	a pute colle	warmanta ant	ions oor	nyantible securities)	

#### Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of	Derivative Security	Security: Direct (D)	

# Edgar Filing: EPSTEIN ROBERT S - Form 3

Shares

or Indirect (I) (Instr. 5)

# **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
EPSTEIN ROBERT S C/O AVEO PHARMACEUTICALS, INC. 75 SIDNEY STREET CAMBRIDGE, MA 02139	ÂX	Â	Â	Â			
Signatures							
/s/ Joseph D. Vittiglio, attorney-in-fact	12/20/201	2					
**Signature of Reporting Person	Date						
Evaluation of Poenoncoe							

# **Explanation of Responses:**

### No securities are beneficially owned

- \* If the form is filed by more than one reporting person, see Instruction 5(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).

# Â

# **Remarks:**

### No securities are beneficially owned.

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.