FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

HENNEMAN JOHN B III			. Date of Event requiring Staten Month/Day/Year 0/01/2014	tatement /Year) NEWLINK GENETICS CORP [ (NLNK)								
(Last) (First) (Middle) C/O NEWLINK GENETICS CORPORATION		` ′				tionship of Reporting Pers all applicable) Director	10% Owner		5. If Amendment, Date of Original Filed (Month/Day/Year)			
	ORTUNA, SUIT	TE 100			X	Officer (give title below)  EVP, Chief Financia	Other (specify below) al Officer		6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person			
(Street) AUSTIN	TX	78746							A	•	y More than One	
(City)	(State)	(Zip)										
		T	able I - Non	-Derivati	ve Se	ecurities Beneficial	y Owned					
1. Title of Secur	rity (Instr. 4)	Т	able I - Non	2.	Amou	ecurities Beneficial nt of Securities ally Owned (Instr. 4)	3. Ownersh Form: Dire or Indirect (Instr. 5)	cṫ (D)   (	1. Natu Instr.		Beneficial Ownership	
1. Title of Secur	ity (Instr. 4)		Table II - D	2. Be	Amour eneficia	nt of Securities	3. Ownersh Form: Dire or Indirect (Instr. 5)	ct (D) (			Beneficial Ownership	
	rity (Instr. 4)	(e.g	Table II - D	2. Berivative S, warrar	Amour eneficia Secu nts, o	nt of Securities ally Owned (Instr. 4) urities Beneficially	3. Ownersh Form: Dire or Indirect (Instr. 5) Owned securitie	ct (D) (	sion cise		Beneficial Ownership  6. Nature of Indirect Beneficial Ownership (Instr. 5)	

Explanation of Responses:

Remarks:

No securities are beneficially owned.

/s/ John B. Henneman III 10/03/2014

\*\* Signature of Reporting Person Date

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

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 5 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).