

AXONYX INC  
Form SC 13G/A  
February 12, 2003

SEC 1745 (02-02)	<b>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 control number.</b>
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**UNITED STATES  
SECURITIES AND EXCHANGE  
COMMISSION**

Washington, D.C. 20549

**SCHEDULE 13G**

OMB APPROVAL  
OMB Number:  
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**Under the Securities Exchange Act of 1934  
(Amendment No. 2)\***

**AXONYX INC.**

(Name of Issuer)

**Common Stock**

(Title of Class of Securities)

**05461R101**

(CUSIP Number)

**Annual Filing Requirement**

(Date of Event Which Requires Filing of this Statement)

Check the appropriate box to designate the rule pursuant to which this Schedule is filed:

- Rule 13d-1(b)
- Rule 13d-1(c)
- Rule 13d-1(d)

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\*The remainder of this cover page shall be filled out for a reporting person's initial filing on this form with respect to the subject class of securities, and for any subsequent amendment containing information which would alter the disclosures provided in a prior cover page.

The information required on the remainder of this cover page shall not be deemed to be filed for the purpose of Section 18 of the Securities Act of 1934 ( Act ) or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, see the Notes).

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CUSIP No. 05461R101

1. **Names of Reporting Persons. I.R.S. Identification Nos. of above persons (entities only)**  
Marvin Stanley Hausman, M.D.

2. **Check the Appropriate Box if a Member of a Group (See Instructions)**

(a)  [ ]

(b)  [ ]

3. **SEC Use Only**

4. **Citizenship or Place of Organization**  
United States

5. **Sole Voting Power**  
2,944,939 shares

**Number of  
Shares  
Beneficially  
Owned by  
Each  
Reporting  
Person With**

6. **Shared Voting Power**  
0 shares

7. **Sole Dispositive Power**  
2,944,939 shares

8. **Shared Dispositive Power**  
0 shares

9. **Aggregate Amount Beneficially Owned by Each Reporting Person**  
2,944,939 shares

10. **Check if the Aggregate Amount in Row (9) Excludes Certain Shares (See Instructions)** [  ]

11. **Percent of Class Represented by Amount in Row (9)**  
12.1%

12. **Type of Reporting Person (See Instructions)**  
IN

**Item 1.**

- (a) **Name of Issuer**  
Axonyx Inc.
- (b) **Address of Issuer's Principal Executive Offices**  
825 Third Avenue, 40<sup>th</sup> Floor, New York, NY 10022

**Item 2.**

- (a) **Name of Person Filing**  
Marvin Stanley Hausman, M.D.
- (b) **Address of Principal Business Office or, if none, Residence**  
825 Third Avenue, 40<sup>th</sup> Floor, New York, New York 10022
- (c) **Citizenship**  
United States.
- (d) **Title of Class of Securities**  
Common Stock, par value \$.001 per share
- (e) **CUSIP Number**  
05461R101

**Item 3.**

**If this statement is filed pursuant to §§240.13d-1(b) or 240.13d-2(b) or (c), check whether the person filing is a:**

Not Applicable

**Item 4.**

**Ownership**

**Provide the following information regarding the aggregate number and percentage of the class of securities of the issuer identified in Item 1.**

- (a) **Amount beneficially owned:** Marvin S. Hausman, M.D. beneficially owns 2,944,939 shares of Common Stock of which 512,500 shares are issuable upon exercise of currently vested stock options.
- (b) **Percent of class:** 12.1%

- (c) **Number of shares as to which the person has:**
- (i) **Sole power to vote or to direct the vote** 2,944,939 shares
  - (ii) **Shared power to vote or to direct the vote** 0 shares.
  - (iii) **Sole power to dispose or to direct the disposition of** 2,944,939 shares.
  - (iv) **Shared power to dispose or to direct the disposition of** 0 shares.

**Item 5. Ownership of Five Percent or Less of a Class**

Not Applicable.

**Item 6. Ownership of More than Five Percent on Behalf of Another Person**

None.

**Item 7. Identification and Classification of the Subsidiary Which Acquired the Security Being Reported on By the Parent Holding Company or Control Person**

Not Applicable.

**Item 8. Identification and Classification of Members of the Group**

Not Applicable.

**Item 9. Notice of Dissolution of Group**

Not Applicable.

**Item 10.**  
Not Applicable.

**Certification**

**Signature**

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

February 10, 2003

**Date**

/s/ Marvin S. Hausman, M.D.

**Signature**

Marvin S. Hausman, M.D.

**Name/Title**