Willwerth Christina
Form 3
January 22, 2019

FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

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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

(Print or Type Responses)

1. Name and Address of Reporting Person *
Â Willwerth Christina
(Last) (First) (Middle)

C/O FLEXION THERAPEUTICS, INC.,Â 10 MALL ROAD, SUITE 301
(Street)

BURLINGTON,Â MAÂ 01803
(City) (State) (Zip)

2. Date of Event Requiring Statement (Month/Day/Year)
01/10/2019

3. Issuer Name **and** Ticker or Trading Symbol
Flexion Therapeutics Inc [FLXN]

4. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

_____ Director _____ 10% Owner
__X__ Officer (give title below) _____ Other (specify below)
Chief Strategy Officer

5. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)
_X_ Form filed by One Reporting Person
___ Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Beneficially Owned

1.Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	22,419	D	Â

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

SEC 1473 (7-02)

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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 Derivative	5. Ownership Form of Derivative Security:	6. Nature of Indirect Beneficial Ownership (Instr. 5)

	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Security	Direct (D) or Indirect (I) (Instr. 5)	
Stock Option (right to buy)	Â (1)	09/23/2019	Common Stock	8,750	$ 0.16	D	Â
Stock Option (right to buy)	Â (1)	07/18/2023	Common Stock	25,830	$ 2.52	D	Â
Stock Option (right to buy)	Â (1)	03/02/2024	Common Stock	32,000	$ 17.61	D	Â
Stock Option (right to buy)	Â (2)	01/20/2025	Common Stock	25,000	$ 22.91	D	Â
Stock Option (right to buy)	Â (3)	03/18/2025	Common Stock	5,000	$ 29.06	D	Â
Stock Option (right to buy)	Â (4)	01/03/2026	Common Stock	20,000	$ 18.2	D	Â
Stock Option (right to buy)	Â (5)	12/19/2026	Common Stock	25,000	$ 18.56	D	Â
Stock Option (right to buy)	Â (6)	01/31/2028	Common Stock	23,333	$ 22.31	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Willwerth Christina C/O FLEXION THERAPEUTICS, INC. 10 MALL ROAD, SUITE 301 BURLINGTON,Â MAÂ 01803	Â	Â	Â Chief Strategy Officer	Â

Signatures

/s/ Mark S. Levine, Attorney-in-Fact	01/22/2019
**Signature of Reporting Person	Date

Explanation of Responses:

* 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).

(1) The stock option is fully vested and exercisable.

(2) 1/4 of the shares subject to the option vest one year after January 21, 2015, with 1/48th of the shares vesting monthly thereafter over the next 3 years.

(3) 1/4 of the shares subject to the option vest one year after March 19, 2015, with 1/48th of the shares vesting monthly thereafter over the next 3 years.

(4) 1/4 of the shares subject to the option vest one year after January 4, 2016, with 1/48th of the shares vesting monthly thereafter over the next 3 years.

(5) 1/4 of the shares subject to the option vest one year after December 20, 2016, with 1/48th of the shares vesting monthly thereafter over the next 3 years.

(6) 1/4 of the shares subject to the option vest on January 1, 2019, with 1/48th of the shares vesting monthly thereafter over the next 3 years.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure.
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