Wentworth Kerry Form 4 March 05, 2019

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL OMB

3235-0287 Number: January 31, Expires:

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burden hours per response...

5. Relationship of Reporting Person(s) to

Issuer

Check this box if no longer subject to Section 16. Form 4 or Form 5

obligations

may continue.

See Instruction

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

2. Issuer Name and Ticker or Trading

Symbol

1(b).

(Print or Type Responses)

Wentworth Kerry

Stock

1. Name and Address of Reporting Person *

			Flexion Therapeutics Inc [FLXN]				(Check all applicable)			
	(First) (M ON THERAPEU' ALL ROAD, SUI'		3. Date of (Month/Date 03/01/20	-	ansaction			DirectorX Officer (given below)	10%	Owner er (specify
	(Street)			ndment, Dat h/Day/Year)	_			6. Individual or Jo Applicable Line) _X_ Form filed by	•	
BURLINGT	ON, MA 01803							Form filed by Merson	More than One Re	porting
(City)	(State)	(Zip)	Table	I - Non-D	erivative S	ecurit	ies Acq	uired, Disposed o	f, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	med on Date, if Day/Year)	3. Transaction Code (Instr. 8)	4. Securit on(A) or Dis (D) (Instr. 3, 4)	sposed	of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	03/01/2019			A	36,000	A	\$0	50,607	D	
Common									_	

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

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6,000

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock option (right to buy)	\$ 14.75	03/01/2019		A	18,000	<u>(1)</u>	02/28/2029	Common Stock	18,000

Reporting Owners

Reporting Owner Name / Address	Relationships						
Reporting Owner Name / Marcos	Director	10% Owner	Officer	Other			
Wentworth Kerry C/O FLEXION THERAPEUTICS, INC. 10 MALL ROAD, SUITE 301 BURLINGTON, MA 01803			Chief Regulatory Officer				

Date

Signatures

/s/ Mark S. Levine, 03/05/2019 Attorney-in-Fact **Signature of Reporting Person

Explanation of Responses:

- 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).

Twenty-five percent (25%) of the shares subject to the option shall vest one year after January 1, 2019 (the "Vesting Commencement

(1) Date") and thereafter one-forty-eighth (1/48th) of the total shares shall vest each month following the one year anniversary of the Vesting Commencement Date, so that all of the shares shall be vested four (4) years after the Vesting Commencement Date.

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.

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