Anthera Pharmaceuticals Inc

Form 4

January 02, 2015

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** Form 4 or Form 5

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 may continue. 30(h) of the Investment Company Act of 1940

See Instruction 1(b).

obligations

(Print or Type Responses)

1. Name and Address of Reporting Person \*

ENGLE STEVEN B

2. Issuer Name and Ticker or Trading

Symbol

Anthera Pharmaceuticals Inc

[ANTH]

(Last)

(City)

(Instr. 3)

(First) (Middle) 3. Date of Earliest Transaction

(Month/Day/Year) 12/30/2014

25801 INDUSTRIAL BLVD SUITE

(State)

В

(Street) 4. If Amendment, Date Original

Filed(Month/Day/Year)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

6. Individual or Joint/Group Filing(Check

5. Relationship of Reporting Person(s) to

(Check all applicable)

10% Owner

Other (specify

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

Issuer

below)

Director

Applicable Line)

Officer (give title

HAYWARD, CA 94545

1. Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year) Execution Date, if

(Month/Day/Year)

(Zip)

3. 4. Securities TransactionAcquired (A) or Code (Instr. 8)

Disposed of (D) (Instr. 3, 4 and 5)

5. Amount of Securities Beneficially Owned Following Reported

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial (I) Ownership (Instr. 4) (Instr. 4)

**OMB APPROVAL** 

3235-0287

January 31,

2005

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**OMB** 

Number:

Expires:

response...

Estimated average

burden hours per

(A) Transaction(s) or (Instr. 3 and 4) Code V Amount (D) Price

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

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SEC 1474 (9-02)

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

1. Title of Derivative Conversion 3. Transaction Date 3A. Deemed

(Month/Day/Year) Execution Date, if

5. Number of TransactionDerivative

6. Date Exercisable and **Expiration Date** 

7. Title and Amount of 8 Underlying Securities

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| Security (Instr. 3)                  | or Exercise<br>Price of<br>Derivative<br>Security |            | any<br>(Month/Day/Year) | Code (Instr. | 8) . | Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) |     | (Month/Day/Year)    |                    | (Instr. 3 and 4) |                                     |
|--------------------------------------|---|------------|-------------------------|--------------|------|---|-----|---------------------|--------------------|------------------|-------------------------------------|
|                                      |   |            |                         | Code         | V    | (A)   | (D) | Date<br>Exercisable | Expiration<br>Date | Title            | Amount<br>or<br>Number<br>of Shares |
| Stock<br>option<br>(right to<br>buy) | \$ 1.61   | 12/30/2014 |                         | A            |      | 12,500  |     | <u>(1)</u>          | 12/30/2024         | Common<br>Stock  | 12,500<br>(1)                       |

## **Reporting Owners**

#### Relationships

Reporting Owner Name / Address

Director  $\frac{10\%}{\text{Owner}}$  Officer Other

ENGLE STEVEN B 25801 INDUSTRIAL BLVD SUITE B HAYWARD, CA 94545

### **Signatures**

/s/ May Liu, by power of attorney

01/02/2015

\*\*Signature of Reporting Person

Date

## **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).
- (1) The stock option vests and becomes exercisable in 12 equal monthly installments from the grant date of December 30, 2014. This stock option is fully exercisable on December 30, 2015.

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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