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ANIKA THERAPEUTICS INC Form 3 October 04, 2013 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB Number 3235-0104

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)

Person *	d Address of Rep	U U	2. Date of Event Res Statement (Month/Day/Year)	1 0 0.155001 Hull	3. Issuer Name and Ticker or Trading Symbol ANIKA THERAPEUTICS INC [ANIK]					
(Last)	(First)	(Middle)	10/02/2013		4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)		
32 WIGG	GINS AVENU (Street)	E		Director X Officer	(Check all applicable) Director 10% Owner X Officer Other		 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting 			
BEDFORD, MA 01730					(give title below) (specify below) Chief Scientific Officer		Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Tab	le I - Non-Deriva	tive Securiti	es Ben	eneficially Owned			
1.Title of So (Instr. 4)	ecurity			nount of Securities ficially Owned :. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Natu Owners (Instr. 5	ship	irect Beneficial		
	ctly or indirectly.		ch class of securities	- 3	SEC 1473 (7-02))				
	inforn requir currei	nation conta ed to respo ntly valid Ol	pond to the collect ained in this form a nd unless the form MB control numbe	are not n displays a r.						
	Table II - Dei	ivative Secu	rities Beneficially Ov	wned (e.g., puts, calls	, warrants, opt	10ns, co	nvertible	securities)		
1. Title of I (Instr. 4)	Derivative Securi	Expi	ration Date /Day/Year)	3. Title and Amount o Securities Underlying Derivative Security (Instr 4)		se For	mership m of	6. Nature of Indirect Beneficial Ownership (Instr. 5)		

Date

Exercisable

Expiration

Title

Date

Derivative

Security

Amount or

Number of

Shares

Security:

Direct (D)

or Indirect

(Instr. 5)

(I)

Reporting Owners

Reporting Owner Name / Address	Relationships								
	Director	10% Owner	Officer	Other					
SHEETS JOHN W JR 32 WIGGINS AVENUE BEDFORD, MA 01730	Â	Â	Chief Scientific Officer	Â					
Signatures									
/s/ Sylvia Cheung, Attorney-in-Fact		10/04/2013							
**Signature of Reporting Person		Date							
Evaluation of Decremence:									

Explanation of Responses:

No securities are beneficially owned

* 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).

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.