Anika Therapeutics, Inc. Form 4 November 09, 2016

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

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

Check this box

obligations may continue.

See Instruction 1(b).

(Last)

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

SECURITIES

(Print or Type Responses)

1. Name and Address of Reporting Person * **BOWER JOSEPH I**

(First)

Anika Therapeutics, Inc. [ANIK]

(Middle)

3. Date of Earliest Transaction (Month/Day/Year)

32 WIGGINS AVENUE 11/07/2016

> (Street) 4. If Amendment, Date Original Filed(Month/Day/Year)

Symbol

5. Relationship of Reporting Person(s) to Issuer

OMB APPROVAL

Estimated average

burden hours per

3235-0287

January 31,

2005

0.5

OMB

Number:

Expires:

response...

(Check all applicable)

_X__ Director 10% Owner _ Other (specify Officer (give title

6. Individual or Joint/Group Filing(Check Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting Person

BEDFORD, MA 01730

(City)	(State) (Zip) Table	e I - Non-D	erivative	Secur	ities Acqu	uired, Disposed of	f, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactio Code (Instr. 8)	(Instr. 3,	(A) or	d of (D) 5)	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 (1)	11/07/2016		Code V M	Amount 1,540	(D)	Price \$ 12.36	38,513	D	
Common Stock (2)	11/07/2016		F	431	D	\$ 44.26	38,082	D	
Common Stock (3)	11/09/2016		S	500	D	\$ 43.4	37,582	D	
Common Stock (3)	11/09/2016		S	40	D	\$ 43.31	37,542	D	

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

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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. Transacti Code (Instr. 8)	5. Number on Derivative 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 Appreciation Right (1)	\$ 12.36	11/07/2016		M	1,540	(1)	(1)	Common Stock	1,540

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer Other			
BOWER JOSEPH I						
32 WIGGINS AVENUE	\mathbf{Y}					

Signatures

BEDFORD, MA 01730

/s/ Sylvia Cheung for Charles H. Sherwood, Attorney-in-fact

**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) Exercise of stock appreciation rights ("SARs") granted on December 14, 2006, which vested in full immediately on such date, and expiring on December 14, 2016.
- (2) Reflects 431 shares of common stock utilized to cover the exercise price of the above listed SARs award by the Reporting Person on November 7, 2016.
- (3) Reflects an aggregate of 540 shares of common stock sold to satisfy tax obligations related to the exercise of the above listed SARs award by the Reporting Person on November 9, 2016.

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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