## Edgar Filing: FIVE PRIME THERAPEUTICS INC - Form 4

FIVE PRIME THERAPEUTICS INC Form 4 September 02, 2016

FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION							OMB APPROVAL				
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287			
Check thi if no long	or	x							Expires:	January 31, 2005	
subject to Section 1 Form 4 or Form 5	5. SECURITIES								Estimated a burden hour response	verage	
Form 5 obligations may continue. See Instruction 1(b). 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 F	Responses)										
RINGO WILLIAM R Symbol			r Name <b>and</b> Ticker or Trading RIME THERAPEUTICS				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
			INC [FF	PRX]				(Check an applicable)			
(Last) (First) (Middle) 3. Date of (Month/D TWO CORPORATE DRIVE 09/01/20			-				_X_Director10% Owner Officer (give titleOther (specify below)below)				
•>+•1-			ndment, Date Original				6. Individual or Joint/Group Filing(Check				
Filed(Mon			th/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting				
SOUTH SA FRANCISC	N O, CA 94080							Person			
(City)	(State) (Zip) <b>Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned</b>										
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if any (Month/Day/Year)			3.4. Securities AcquiredTransactior(A) or Disposed of (D)Code(Instr. 3, 4 and 5)(Instr. 8)				Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
				Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)			
Common Stock	09/01/2016			М	500	А	\$ 11.65	500	D		
Common Stock	09/01/2016			S <u>(1)</u>	500	D	\$ 44.2	0	D		

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

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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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 on of 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)		8. Pri Deriv Secur (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (right to buy)	\$ 44.2	09/01/2016		S	500	(2)	09/30/2024	Common Stock	500	\$

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships						
	Director	10% Owner	Officer	Other			
RINGO WILLIAM R TWO CORPORATE DRIVE SOUTH SAN FRANCISCO, CA 94080	X						
Signatures							
/s/ Francis Sarena, Attorney-in-Fact	09/02/2016						
**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 sales reported on this Form 4 were effected pursuant to a 10b5-1 trading plan adopted by the reporting person on April 15, 2016.

(2) The shares underlying this option vest at a rate of one-third per year on each anniversary of October 1, 2014.

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.