Edgar Filing: ANIKA THERAPEUTICS INC - Form 4

ANIKA THE Form 4 August 09, 2	ERAPEUTICS IN 013	ίC								
FORM	14								OMB AF	PROVAL
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMMISSION	OMB Number:	3235-0287
Check this box if no longer subject to Section 16. Form 4 or				GES IN BENEFICIAL OWNERSHIP (SECURITIES					Expires: January 3 200 Estimated average burden hours per	
Form 5 obligation may cont See Instru 1(b).	Filed pur ^{ns} Section 17(a) of the H	Public U		ding Con	ipany	Act of	e Act of 1934, 1935 or Section 0	response	0.5
(Print or Type F	Responses)									
WHEELER STEVE E Symbol			r Name and Ticker or Trading A THERAPEUTICS INC]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) 32 WIGGIN	(First) (I IS AVENUE	Middle)	3. Date of (Month/D 08/08/2	-	ransaction			X Director Officer (give t below)	itle $$	Owner r (specify
			endment, Date Original onth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
BEDFORD,	, MA 02173							Form filed by M Person	ore than One Rep	porting
(City)	(State)	(Zip)	Tabl	e I - Non-E	Derivative S	Securi	ties Acq	uired, Disposed of,	or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	Date, if	3. Transactic Code (Instr. 8) Code V	4. Securit on(A) or Dis (Instr. 3, 4)	sposed	of (D)	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	08/08/2013			S	26,984	. ,	\$ 23.61	48,219	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.

 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. Transac Code (Instr. 8	5. tionNumber of) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	3	Date	Amou Unde Secur	le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code 1	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
WHEELER STEVE E 32 WIGGINS AVENUE BEDFORD, MA 02173	Х						
Signatures							
/s/ Charles H. Sherwood, Attorney-in-Fact		08/09/2013					
**Signature of Reporting Person		D	ate				

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).

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.