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PERNIX THERAPEUTICS HOLDINGS, INC. Form 4 December 04, 2013 FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 Check this box if no longer STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF subject to **SECURITIES** Section 16. Form 4 or Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations 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). (Print or Type Responses) 1. Name and Address of Reporting Person * 2. Issuer Name and Ticker or Trading Collins Cooper C. Symbol PERNIX THERAPEUTICS HOLDINGS, INC. [PTX] (Last) (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year)

12/02/2013

Filed(Month/Day/Year)

4. If Amendment, Date Original

33219 FOREST WEST DR

(Street)

MAGNOLIA, TX 77354

| (City) | (State) | (Zip) Tab | le I - Non-J | Derivative | Secur | ities Acqui | red, Disposed of | , 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. Transactic Code (Instr. 8) | 4. Securities Acquired (A) opr Disposed of (D) (Instr. 3, 4 and 5) (A) or | | | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | Code V | Amount | (D) | Price \$ | (Instr. 3 and 4) | | |
| Common Stock | 12/02/2013 | | S <u>(1)</u> | 14,100 | D | ⁴ 2.5454 (2) | 6,435,946 | D | |
| Common Stock | 12/03/2013 | | S <u>(1)</u> | 7,429 | D | \$ 2.4798 (3) | 6,428,517 | D | |
| Common Stock | 12/04/2013 | | S <u>(1)</u> | 31,019 | D | \$ 2.3824 (4) | 6,397,498 | D | |
| Common Stock | | | | | | | 245,163 | I | Spouse |

OMB APPROVAL

OMB 3235-0287 Number: January 31, Expires: 2005 Estimated average burden hours per response... 0.5

5. Relationship of Reporting Person(s) to

(Check all applicable)

Chief Strategic Officer

6. Individual or Joint/Group Filing(Check

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

below)

X___10% Owner

___Other (specify

Issuer

below)

Person

X Director

Applicable Line)

X_Officer (give title

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| Common Stock Common | | | | | | 390,6 | | | GR | AT ousal | |
|--|---|---|---|--|---|---|---------------------|-------|--|---|--|
| Stock | | | | | | 390,6 | 81 I | | GR | | |
| Reminder: R | Report on a sep | parate line for each cla | ss of securities benef | Person inform require | ns who re ation con ed to resp ys a curre | or indirectly. spond to the tained in thi pond unless ently valid O | s form are the form | not | SEC 14 (9-0 | | |
| 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. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Secur | int of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr |
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Addre | SS | Relationships | | | | | | | |
|---|------------|--------------------------|-------------------------|-------|--|--|--|--|--|
| | Director | rector 10% Owner Officer | | Other | | | | | |
| Collins Cooper C. 33219 FOREST WEST DR MAGNOLIA, TX 77354 | Х | Х | Chief Strategic Officer | | | | | | |
| Signatures | | | | | | | | | |
| /s/Cooper C. Collins | 12/04/2013 | | | | | | | | |
| ****** | D (| | | | | | | | |

<u>**</u>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 in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on 8/26/13.

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The price reported in Table I is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$2.50 to \$2.67, inclusive. The reporting person undertakes to provide to Pernix Therapeutics Holdings, Inc., any security holder of Pernix

(2) S2.67, inclusive. The reporting person indertakes to provide to Perinx Therapeutics Holdings, Inc., any security holder of Perinx
Therapeutics Holdings, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.

The price reported in Table I is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$2.40 to \$2.56, inclusive. The reporting person undertakes to provide to Pernix Therapeutics Holdings, Inc., any security holder of Pernix

(3) Therapeutics Holdings, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.

The price reported in Table I is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$2.32 to \$2.50, inclusive. The reporting person undertakes to provide to Pernix Therapeutics Holdings, Inc., any security holder of Pernix

(4) ^{32.50}, inclusive: The reporting person indertaxes to provide to remix Therapeutics Holdings, Inc., any security holder of remix
Therapeutics Holdings, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.

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.