Edgar Filing: Sarepta Therapeutics, Inc. - Form 4

Sarepta The	rapeutics, Inc.										
Form 4											
June 04, 201	5										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								PPROVAL			
Washington, D.C. 20549							NOMB Number:	3235-0287			
Check th								Expires:	January 31		
if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF							Estimated	2005 average			
Section 16. SECURITIES							burden hou				
Form 4 c								response	•		
Form 5 obligatio							inge Act of 1934,				
may con				•	•	- ·	t of 1935 or Section	on			
See Instr		30(h)	of the I	nvestmen	t Compa	ny Act of	1940				
1(b).											
(Print or Type]	Responses)										
(I fint of Type)	(tesponses)										
1. Name and A	Address of Reporting	Person *	2. Issue	er Name an	d Ticker o	Ticker or Trading 5. Relationship of			Reporting Person(s) to		
Nicaise Cla	ude		Symbol				Issuer				
			Sarepta Therapeutics, Inc. [SRPT]								
(Last)	(First) (Middle)	• •			(Che	(Check all applicable)				
				(Month/Day/Year)			_X_ Director	109	% Owner		
215 FIRST	STREET, SUITE	Ξ7	06/02/2015			Officer (give title Other (specify					
							below) below)				
(Street)			4. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check					
Filed(Month/Day/Year)				ur)		Applicable Line)) by One Reporting Person				
CAMPDID	CE MA 02142							More than One R			
CAMDRID	GE, MA 02142						Person				
(City)	(State)	(Zip)	Tab	ole I - Non-	Derivative	e Securities A	Acquired, Disposed	of, or Beneficia	lly Owned		
1.Title of	2. Transaction Date			3.	4. Securi			6. Ownership	7. Nature of		
Security (Instr. 3)	(Month/Day/Year)	Execution	Date, if	Transactio			Securities Beneficially	Form: Direct (D) or Indirect	Indirect		
(IIIsu. <i>5</i>)		any (Month/Day/Ye		Code Disposed of /Year) (Instr. 8) (Instr. 3, 4			Owned	(I) of maneet	Ownership		
		X	.		(Following	(Instr. 4)	(Instr. 4)		
						(A)	Reported				
						or	Transaction(s) (Instr. 3 and 4)				
				Code V	Amount	(D) Price	(instr. 5 and 4)				
Reminder: Rer	oort on a separate line	e for each cla	ass of sec	urities bene	ficially ow	ned directly	or indirectly.				
					-	-	spond to the colle	ction of S	SEC 1474		
information contained in this form are not (9-02)							(9-02)				
							ond unless the fo				
					numl		ently valid OMB co				
					inanni						

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof Derivative	Expiration Date	Underlying Securitie
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Acquired		

	Derivative Security			(A) or Dispos (D) (Instr. and 5)					
			Code	V (A)	(D)	Date Exercisable	Expiration Date	Title	Amour or Numbe of Shares
Non-Qualified Stock Option (right to buy)	\$ 25.18	06/02/2015	А	9,746	5	<u>(1)</u>	06/02/2025	Common Stock	9,74

Reporting Owners

Reporting Owner Name / Address	Relationships								
	Director	10% Owner	Officer	Other					
Nicaise Claude 215 FIRST STREET, SUITE 7 CAMBRIDGE, MA 02142	Х								
Signatures									
By: David Tyronne Howton For M.D.	0	6/04/2015							

<u>**Signature of Reporting Person</u>

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) This option will vest at a rate of 25% annually over four years on the earlier of (i) the anniversary date of the grant and (ii) the date of the annual meeting of our stockholders in the year following the date of grant.

Date

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.