Dermira, Inc. Form 3 October 02, 2014

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

**OMB APPROVAL** 

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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

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

**SECURITIES** 

30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting

Person \*

À BAUER EUGENE A

(Last)

(First)

(Middle)

Statement

(Month/Day/Year)

10/02/2014

2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol

Dermira, Inc. [DERM]

C/O DERMIRA, INC., 2055

WOODSIDE ROAD

(Street)

4. Relationship of Reporting Person(s) to Issuer

Filed(Month/Day/Year)

(Check all applicable)

Chief Medical Officer

\_X\_ Director \_X\_\_ Officer

10% Owner Other (give title below) (specify below)

6. Individual or Joint/Group Filing(Check Applicable Line) \_X\_ Form filed by One Reporting

5. If Amendment, Date Original

Person

Form filed by More than One

Reporting Person

4. Nature of Indirect Beneficial

**REDWOOD** CITY, CAÂ 94061

> (City) (State)

(Zip)

1. Title of Security

(Instr. 4)

2. Amount of Securities

Beneficially Owned

(Instr. 4)

Ownership Form:

Table I - Non-Derivative Securities Beneficially Owned

Ownership (Instr. 5)

(1)

Direct (D) or Indirect (I)

(Instr. 5)

Common Stock 86,206 I

By the Bauer Family 1995 Trust

Reminder: Report on a separate line for each class of securities beneficially

owned directly or indirectly.

SEC 1473 (7-02)

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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)

2. Date Exercisable and **Expiration Date** (Month/Day/Year)

3. Title and Amount of Securities Underlying Derivative Security

4. 5. Ownership Conversion or Exercise Form of

6. Nature of Indirect Beneficial Ownership (Instr. 5)

Price of Derivative Derivative Security:

### Edgar Filing: Dermira, Inc. - Form 3

	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Security	Direct (D) or Indirect (I) (Instr. 5)	
Series A Preferred Stock	(2)	(2)	Common Stock	18,272	\$ 0	I	By the Bauer Family 1995 Trust (1)
Employee Stock Option (right to buy)	(3)	10/03/2021	Common Stock	110,434	\$ 0.986	D	Â
Employee Stock Option (right to buy)	(4)	02/08/2022	Common Stock	32,758	\$ 0.986	D	Â
Employee Stock Option (right to buy)	(4)	01/03/2023	Common Stock	146,234	\$ 1.218	D	Â

# **Reporting Owners**

Reporting Owner Name / Address	Relationships					
<b></b>	Director	10% Owner	Officer   Chief Medical Officer	Other		
BAUER EUGENE A C/O DERMIRA, INC. 2055 WOODSIDE ROAD REDWOOD CITY, CA 94061	ÂX	Â	Medical	Â		
Cianaturas						

## **Signatures**

/s/ Christine Ring, by power of attorney

10/02/2014

\*\*Signature of Reporting Person

Date

## **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, see Instruction 5(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 Reporting Person is a Co-Trustee.
- (2) Each share of Preferred Stock will be automatically converted into one (1) share of Common Stock, for no additional consideration, immediately prior to the consummation of the Issuer's initial public offering, and has no expiration date.
- (3) The stock option vests and becomes exercisable in 48 equal monthly installments beginning one month after the vesting commencement date, until such time as the option is 100% vested, subject to the continuing employment of the Reporting Person on each vesting date.
- The stock option vests and becomes exercisable as to 25% of the shares subject to the option on the one-year anniversary of the vesting commencement date, and thereafter vests as to 1/48th of the shares in equal monthly installments, subject to the continuing employment of the Reporting Person on each vesting 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.

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