Karyopharm Therapeutics Inc.

Form 4

November 12, 2014

FORM 4	_								OIVIB AF	PROVAL	
	UNITED	STATES		$\mathbf{RITIES}$ A shington			ANGE C	OMMISSION	OMB Number:	3235-0287	
if no longer subject to Section 16. Form 4 or Form 5 obligations may continue.	subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction  SIATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES  SECURITIES  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							Act of 1934, 1935 or Section	Expires: January 31, 2005 Estimated average burden hours per response 0.5		
(Print or Type Respo	nses)										
1. Name and Addres Mirza Mansoor I						5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)					
(Last)  C/O KARYOPH THERAPEUTIC AVENUE	Middle) WELLS	(Month/Day/Year)					X Director 10% Owner Officer (give title below) Other (specify below)				
NEWTON, MA	Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative	Secu	rities Acqu	ired, Disposed of,	or Beneficiall	y Owned	
	ransaction Date nth/Day/Year)	2A. Deem Execution any (Month/Da	Date, if	3. Transaction Code (Instr. 8)	Omr Dispo (Instr. 3,	sed of		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 11/1	10/2014			S <u>(1)</u>	5,000	D	\$ 45.0511 (2)	7,727	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.

SEC 1474

(9-02)

**OMB APPROVAL** 

#### Edgar Filing: Karyopharm Therapeutics Inc. - Form 4

#### 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.	6. Date Exerc	cisable and	7. Title	and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	onNumber	Expiration D	ate	Amour	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underl	ying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securit	ies	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
									Amount		
						Date Exercisable	Expiration Date		Or Numbar		
								Title Number of			
				Code V	(A) (D)						
				Coue v	(A) (D)				Shares		

## **Reporting Owners**

Relationships Reporting Owner Name / Address

Director 10% Owner Officer Other

Mirza Mansoor Raza C/O KARYOPHARM THERAPEUTICS INC. **85 WELLS AVENUE NEWTON, MA 02459** 



# **Signatures**

/s/ Christopher B. Primiano as Attorney-in-Fact for Mansoor Raza Mirza

11/12/2014

\*\*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) This sale was effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person.
  - The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$45.00 to \$45.45, inclusive. The reporting person undertakes to provide to Karyopharm Therapeutics Inc., any security holder of Karyopharm
- Therapeutics 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 ranges set forth in footnote (2) to this Form 4.

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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