Edgar Filing: Ampio Pharmaceuticals, Inc. - Form 4

Ampio Pharmaceuticals, Inc. Form 4 December 23, 2014 OMB APPROVAL FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB 3235-0287 Washington, D.C. 20549 Number: Check this box January 31, Expires: if no longer 2005 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF subject to Estimated average **SECURITIES** Section 16. burden hours per Form 4 or response... 0.5 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 * 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading MACALUSO MICHAEL Issuer Symbol Ampio Pharmaceuticals, Inc. (Check all applicable) [AMPE] (Last) (First) (Middle) 3. Date of Earliest Transaction _X__ Director 10% Owner X_Officer (give title Other (specify (Month/Day/Year) below) below) C/O AMPIO 12/20/2014 Chief Executive Officer PHARMACEUTICALS, INC., 5445 DTC PARKWAY, SUITE 925 (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting GREENWOOD Person VILLAGE, CO 80111 (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1.Title of 5. Amount of 6. Ownership 7. Nature of 2. Transaction Date 2A. Deemed 3. 4. Securities Security (Month/Day/Year) Execution Date, if TransactionAcquired (A) or Securities Form: Direct Indirect (Instr. 3) Code Disposed of (D) Beneficially (D) or Indirect Beneficial any (Month/Day/Year) (Instr. 8) (Instr. 3, 4 and 5) Ownership Owned (\mathbf{I}) Following (Instr. 4) (Instr. 4) Reported (A) Transaction(s) or (Instr. 3 and 4) Code V Amount (D) Price Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. Persons who respond to the collection of SEC 1474

required to respond to the collection of (9-02) 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. Transactio Code (Instr. 8)	ransactiorDerivative ode Securities				7. Title and Amount of Underlying Securities (Instr. 3 and 4)		
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (right to buy)	\$ 3.46	12/20/2014		А		400,000	<u>(1)</u>	12/20/2024	Common Stock	400,000	
Reporting Owners											
Reporting Owner Name / Address Director					Relationships			Other			
	USO MICH	AEL		10% Owne	a U	incer		Ouler			

Chief Executive Officer

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MACALUSO MICHAEL
C/O AMPIO PHARMACEUTICALS, INC.
5445 DTC PARKWAY, SUITE 925
GREENWOOD VILLAGE, CO 80111

Signatures

/s/ Gregory A. Gould, by power of 12/23/2014 attorney

**Signature of Reporting Person

Date

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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).

133,333 shares subject to the Option will vest and become exercisable on each of January 1, 2015 and January 1, 2016 and 133,334 shares will vest and become exercisable on January 1, 2017, subject to the Reporting Person's continuous service to the Issuer on each such date,

(1) will vest and become exercisable on randary 1, 2017, subject to the Reporting Ferson's continuous service to the Issuer on each such date, and the terms under the Company's 2010 Stock Option and Incentive Plan and an employment agreement between the Reporting Person and the Issuer.

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.