AERIE PHARMACEUTICALS INC

Form 4 April 14, 2015

FORM 4

OMB APPROVAL

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

OMB 3235-0287 Number:

Check this box if no longer subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

January 31, Expires: 2005

SECURITIES

Estimated average burden hours per

Form 5 obligations may continue. See Instruction

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

0.5 response...

1(b).

(Last)

(Print or Type Responses)

1. Name and Address of Reporting Person * **GOLDBERG MURRAY A**

(First)

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to

Symbol

AERIE PHARMACEUTICALS INC

(Check all applicable)

[AERI]

(Middle)

3. Date of Earliest Transaction

X_ Director 10% Owner

(Month/Day/Year)

04/10/2015

Other (specify Officer (give title

C/O AERIE PHARMACEUTICALS, INC.,, 2030

MAIN STREET, SUITE 1500

(Street) 4. If Amendment, Date Original

(Month/Day/Year)

Applicable Line)

Issuer

Filed(Month/Day/Year)

3.

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

6. Individual or Joint/Group Filing(Check

IRVINE, CA 92614

(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1.Title of Security (Instr. 3)

2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if

TransactionAcquired (A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)

5. Amount of Securities Beneficially Owned Following

6. Ownership 7. Nature of Form: Direct Indirect (D) or Beneficial Indirect (I) Ownership (Instr. 4) (Instr. 4)

(A)

4. Securities

Reported Transaction(s)

(Instr. 3 and 4) Price

Common Stock

04/10/2015

Code V Amount (D) 1,700 \$0 Α

(1)

1,700

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)

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

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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. Number of or Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Derivative Expiration Date ecurities (Month/Day/Year) acquired (A) r Disposed of D) Instr. 3, 4,		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)	\$ 32.3	04/10/2015		A	10,000	(2)	04/10/2025	Common Stock	10,000	

Reporting Owners

Reporting Owner Name / Address	Relationships					
reporting 6 mer runne, runness	Director	10% Owner	Officer	Other		
GOLDBERG MURRAY A C/O AERIE PHARMACEUTICALS, INC., 2030 MAIN STREET, SUITE 1500 IRVINE, CA 92614	X					

Signatures

/s/ Richard J. Rubino, Attorney-in-Fact for Murray A.
Goldberg

04/14/2015

**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) Subject to the reporting person's continued service on the board of directors of the issuer through the vesting date, these shares of Common Stock are scheduled to vest on April 9, 2016.
- (2) Subject to the reporting person's continued service on the board of directors of the issuer through the applicable vesting date, this option is scheduled to vest ratably on each of the first 12 monthly anniversaries of April 10, 2015.

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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