## Edgar Filing: Primiano Christopher Brett - Form 4

Primiano Ch	ristopher Brett											
Form 4												
May 10, 201												
FORM									OMB AF	PROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMN Washington, D.C. 20549						OMMISSION	OMB Number:	3235-0287				
Check th if no long subject to Section 1 Form 4 o	ger <b>STATEN</b> 6. r	x STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								Expires: January 31, 2005 Estimated average burden hours per response 0.5		
Form 5 obligatio may cont <i>See</i> Instru 1(b).	ns Section 17(	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										
(Print or Type I	Responses)											
1. Name and Address of Reporting Person <u>*</u> Primiano Christopher Brett			2. Issuer Name <b>and</b> Ticker or Trading Symbol Karyopharm Therapeutics Inc. [KPTI]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) (First) (Middle) C/O KARYOPHARM THERAPEUTICS INC., 85 WELLS AVENUE			3. Date of (Month/D	3. Date of Earliest Transaction (Month/Day/Year) 05/10/2018				Director 10% Owner Officer (give title Other (specify below) below) EVP, CBO, GC & Secretary				
	(Street)	(Street) 4. If Ame Filed(Mor				1		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
NEWTON,	MA 02459							Form filed by M Person				
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secui	rities Acqu	uired, Disposed of,	or Beneficiall	y Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	3. 4. Securities Acquired Transactior(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or			d of (D) 5)	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	05/10/2018			Code V $S_{\underline{(1)}}^{(1)}$	Amount 2,000	(D) D	Price \$ 18.012 (2)	2,881	D			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 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)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amor Unde Secur	le and unt of rlying tities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address		Relationships						
r of the second second	Director	10% Owner	Officer	Other				
Primiano Christopher Brett C/O KARYOPHARM THERAPEUTICS INC. 85 WELLS AVENUE NEWTON, MA 02459			EVP, CBO, GC & Secretary					
Signatures								

/s/Christopher B. 05/10/2018 Primiano

\*\*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.

Represents the weighted average sale price. These shares were sold in transactions at \$18.00 and \$18.06. The reporting person undertakes(2) to provide upon request by the U.S. Securities and Exchange Commission staff, the issuer or a security holder of the issuer full information regarding the number of shares sold at each price.

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.