Edgar Filing: Cagle Gerald D. - Form 4

| Form 4 | | | | | | | | | | | |
|--|---|-------------|-----------------------------------|--|------------|-------|--------------|--|---|---|--|
| May 22, 201 | 14 | | CECU | | | | NOLO | | OMB AF | PROVAL | |
| | UNITED | STATES | | RITIES A shington, | | | NGE C | OMMISSION | OMB Number: | 3235-0287 | |
| Check th if no long subject to Section 1 Form 4 o | 6. | | | | | ICIA | NERSHIP OF | Expires: January 3 200 Estimated average burden hours per response 0. | | | |
| Form 5 obligation may cont <i>See</i> Instru 1(b). | ns Section 17(a | a) of the I | Public U | | ling Cor | npan | y Act of | e Act of 1934, 1935 or Sectior 0 | 1 | | |
| (Print or Type I | Responses) | | | | | | | | | | |
| Cagle Gerald D. Symbol AERI | | | Symbol | 2. Issuer Name and Ticker or Trading ymbol ERIE PHARMACEUTICALS INC | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| | | | [AERI] | 1 11/ 11/10/ | ICLUT. | ic ni | 20 11 (C | (Check all applicable) | | | |
| | | | 3. Date of (Month/D 05/21/2 | - | ansaction | | | _X_ Director Officer (give t below) | | Owner r (specify | |
| | | | | nendment, Date Original Ionth/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| DURHAM, | NC 27703 | | | | | | | Form filed by M Person | | | |
| (City) | (State) | (Zip) | Tabl | e I - Non-D | Derivative | 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. Transactio Code (Instr. 8) Code V | (Instr. 3, | spose | d of (D) | 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 | 05/21/2018 | | | Р | 1,000 | A | \$ 50.245 | 15,050 | 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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

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

Reporting Owners

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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) | Securities Acquired (A) or Disposed of (D) (Instr. 3, | ; | | 7. Title Amou Under Securi (Instr. | nt of lying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr |
|---|---|---|---|--|--|---------------------|--------------------|--|--|---|--|
| | | | | Code V | 4, and 5) (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | | |
|---|---------------|------------|---------|-------|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | |
| Cagle Gerald D. C/O AERIE PHARMACEUTICALS, INC. 4301 EMPEROR BLVD., SUITE 400 DURHAM, NC 27703 | Х | | | | | | | |
| Signatures | | | | | | | | |
| /s/ Richard J. Rubino, Attorney-in-Fact for C Cagle | | 05/22/2018 | | | | | | |
| <u>**</u> 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).

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.