Edgar Filing: Insys Therapeutics, Inc. - Form 4

Insys Thera Form 4 January 14,	peutics, Inc.									
	_						OMB AF	PROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								3235-0287		
Check t if no lor subject Section Form 4 Form 5 obligati may cor <i>See</i> Inst	nger to 16. or Filed pursuant to Ons ntinue. Section 17(a) of th	SECU Section 16(a) of the Public Utility Ho	ANGES IN BENEFICIAL OWN SECURITIES n 16(a) of the Securities Exchange Utility Holding Company Act of 1 Investment Company Act of 1940				Expires: January 20 Estimated average burden hours per response			
1(b).										
(Print or Type Responses)										
1. Name and BAKER D	Symbol	uer Name and Ticker or Trading l Therapeutics, Inc. [INSY]				5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First) (Middle)	3. Date of Earliest 7		-	1 J	(Check	all applicable)		
444 SOUT	(Month/Day/Year) 01/13/2014	onth/Day/Year)				Director 10% Owner X Officer (give title Other (specify below) below) Chief Financial Officer				
	4. If Amendment, D Filed(Month/Day/Yea	-	al		6. Individual or Joint/Group Filing(Check Applicable Line)					
CHANDLI	ER, AZ 85224					_X_ Form filed by O Form filed by Mo Person				
(City)	(State) (Zip)	Table I - Non-	Derivativ	e Secu	rities Acqu	ired, Disposed of,	or Beneficiall	y Owned		
1.Title of Security (Instr. 3)	any	on Date, if Transacti Code Day/Year) (Instr. 8)	omr Dispo (Instr. 3,	sed of 4 and (A) or		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	01/13/2014	М	5,917	A	\$ 3.54	9,042 <u>(1)</u>	D			
Common Stock	01/13/2014	S <u>(2)</u>	5,000	D	\$ 45.253	3 4,042	D			
Common Stock	01/13/2014	S <u>(2)</u>	917	D	\$ 46.0388	3,125	D			
Common Stock	01/14/2014	М	4,083	A	\$ 3.54	7,208	D			
Common Stock	01/14/2014	S <u>(2)</u>	4,083	D	\$ 46.0147	3,125	D			

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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 information contained in this form are not (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. Transactic Code (Instr. 8)	5. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. H Dei Sec (In:
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (right to buy)	\$ 3.54	01/13/2014		М	5,917	(3)	12/27/2022	Common Stock	5,917	
Stock Option (right to buy)	\$ 3.54	01/14/2014		М	4,083	(3)	12/27/2022	Common Stock	4,083	

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
BAKER DARRYL S 444 SOUTH ELLIS STREET CHANDLER, AZ 85224			Chief Financial Officer				

Signatures

/s/ Darryl S. 01/14/2014 Baker <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).

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- (1) Includes 3,125 shares acquired December 11, 2013 pursuant to the Issuer's Employer Stock Purchase Plan
- (2) The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on November 15, 2013
- (3) The option vests in 36 equal monthly installments measured from the grant date of December 27, 2012 and will be fully vested and exercisable on December 27, 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.