Edgar Filing: Dumas Jacques - Form 4

Dumas Jac	ques								
Form 4 January 19	2019								
								OMB A	PPROVAL
FORI	VI 4 UNITED		SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549					3235-0287	
	this box						Expires:	January 31, 2005	
if no lo subject Section Form 4	to SIAIEN 16. or	STATEMENT OF CHAN				NGES IN BENEFICIAL OWNERSHIP OF SECURITIES			
Form 5 obligat may co <i>See</i> Ins 1(b).	16(a) of th Jtility Hol nvestment	ding Cor	on						
(Print or Type	e Responses)								
1. Name and Address of Reporting Person <u>*</u> Dumas Jacques (Last) (First) (Middle)			2. Issuer Name and Ticker or Trading Symbol TETRAPHASE PHARMACEUTICALS INC			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
			[TTPH]				Director	% Owner	
			3. Date of Earliest Transaction (Month/Day/Year)				XOfficer (gi below) Chie	below)	
	RAPHASE CEUTICALS, IN L STREET	C., 480	01/17/2	2018					
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)			 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
WATERT	OWN, MA 02472	,					Person	More than One R	eporting
(City)	(State)	(Zip)	Tab	ole I - Non-l	Derivative	Securities A	cquired, Disposed	of, or Beneficia	lly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	3. Transactio Code (Instr. 8)	4. Securit nAcquired Disposed (Instr. 3, 4	(A) or 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)	Indirect
				Code V	Amount	(D) Price	(
Reminder: R	eport on a separate line	e for each cl	ass of sec	urities bene	ficially ow	ned directly o	or indirectly.		
					inforn requi	nation cont red to respo	pond to the colle ained in this form and unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)

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

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

number.

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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. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	DerivativeExpiration DateSecurities(Month/Day/Year)Acquired (A) orDisposed of (D)(Instr. 3, 4, and		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount Number Shares
Restricted Stock Unit	<u>(1)</u>	01/17/2018		А	40,000	(2)	(2)	Common Stock	40,000
Employee Stock Option (Right to Buy)	\$ 6.24	01/17/2018		A	140,000	<u>(3)</u>	01/16/2028	Common Stock	140,00

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Dumas Jacques C/O TETRAPHASE PHARMACEUTICALS, INC. 480 ARSENAL STREET WATERTOWN, MA 02472			Chief ScientificOfficer			
Signatures						
/s/Maria Stahl as Attorney-in-Fact for Jacques	01	/19/2018				

<u>**Signature of Reporting Person</u> 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) Each restricted stock unit represents a contingent right to receive one share of common stock of Tetraphase Pharmaceuticals, Inc. for no consideration.

Date

- (2) These restricted stock units shall be eligible to vest upon achievement of certain performance conditions and, if such conditions are met, shall vest on January 31, 2021.
- (3) Vests as to 6.25% of the shares on 4/17/2018 and further vests as to an additional 6.25% of the original grant at the end of each successive three-month period thereafter until 1/17/2022.

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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