Edgar Filing: Adamas Pharmaceuticals Inc - Form 4

Adamas Phar	maceuticals Inc										
Form 4											
June 07, 2016	5										
FORM	4 UNITED	STATES	SECU	DITIES /		CHANCE	COMMISSION				
	UNITED	SIAIES		shington				Number:	3235-0287		
Check this	s box		VV C	isinington	, D.C. 20	547			January 31		
if no longe	er STATEN	MENT OF	5 CHANGES IN BENEFICIAL OWNERSHIP OF				Expires:	2005			
subject to Section 16				SECURITIES			Estimated	Estimated average burden hours per			
Form 4 or							response	•			
Form 5 obligation	~ ^						nge Act of 1934,				
may conti				•	•	• •	of 1935 or Section	on			
See Instru		30(h)	of the I	nvestment	t Compai	ny Act of 1	940				
1(b).											
(Print or Type R	esponses)										
1. Name and Address of Reporting Person <u>*</u> MacPhee John A			Iccuor			5. Relationship o Issuer	Relationship of Reporting Person(s) to uer				
White Hee Joi		Symbol Adamas Pharmaceuticals Inc									
			[ADMS]				(Che	(Check all applicable)			
(Last)	(First) (A	Middle)		of Earliest T	ransaction		X Director		% Owner		
			(Wonul/Day/Teal) below			below)	Officer (give titleOther (specify ow) below)				
C/O ADAM	AS EUTICALS, IN	C 1900	06/03/2	2016							
	LUTICALS, IIV Г., SUITE 750	C., 1900									
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line)					
EMERYVIL	LE, CA 94608						Person	wore than One K	eporting		
(City)	(State)	(Zip)	Tab	ole I - Non-l	Derivative	Securities A	cquired, Disposed of	of, or Beneficia	lly Owned		
	2. Transaction Date			3.	4. Securit		5. Amount of	6. Ownership	7. Nature of		
	(Month/Day/Year)		Date, if					Form: Direct (D) or Indirect			
(Instr. 3)		any (Month/Da	y/Year)		(Instr. 3, 4		•	(I)	Ownership		
								(Instr. 4)	(Instr. 4)		
						(A)	Reported Transaction(s)				
					A	or (D) Drive	(Instr. 3 and 4)				
				Code V	Amount	(D) Price					
Reminder: Repo	ort on a separate line	e for each cla	ass of sec	urities bene	ficially ow	ned 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)

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. 5. Number of TransactionDerivative Code Securities (Instr. 8) Acquired (A or Disposed (D) (Instr. 3, 4, and 5)		6. Date Exer Expiration D (Month/Day,	ate	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8 E S (]
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (Right to Buy)	\$ 17.03	06/03/2016		A	15,000	<u>(1)</u>	06/02/2026	Common Stock	15,000	

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Reporting Owners

Reporting Owner Name / Address		Relationships						
	Directo	or	10% Owner	Officer	Other			
MacPhee John A C/O ADAMAS PHARMACEUTICALS, INC 1900 POWELL ST., SUITE 750 EMERYVILLE, CA 94608	с. х							
Signatures								
/s/William Dawson, as Attorney-in-Fact	06/07/20	16						
**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) The Option shares shall vest as follows: 100% of the option shares shall vest on the date 1 year from June 3, 2016, subject to Reporting Person's Continuous Service (as defined in the Issuer's 2014 Equity Incentive Plan) as of each such date.

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.