## Edgar Filing: Adamas Pharmaceuticals Inc - Form 4

Adamas Pharmaceut	icals Inc									
Form 4 August 08, 2016										
									OMB A	PPROVAL
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							N OMB Number:	3235-0287		
Subject to Section 16. Form 4 or Form 5	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, ection 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940							Estimated burden hou response	urs per	
(Print or Type Responses	)									
A			2. Issuer Name <b>and</b> Ticker or Trading Symbol Adamas Pharmaceuticals Inc [ADMS]			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) (Firs C/O ADAMAS PHARMACEUTIC POWELL ST., SUT	ALS, IN	Middle) C., 1900		of Earliest T Day/Year) 2016	ransaction			X Director Officer (giv below)		% Owner her (specify
			mendment, Date Original Month/Day/Year)			<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>				
EMERYVILLE, CA	A 94608							Form filed by Person	More than One R	eporting
(City) (Stat	e)	(Zip)	Tab	ole I - Non-I	Derivative	Secur	ities A	cquired, Disposed	of, or Beneficia	lly Owned
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date any (Month/Day/Year)(Instr. 3)any (Month/Day/Year)		Date, if	Code Disposed of (D)		i)	Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect		
Reminder: Report on a s	eparate line	e for each cl	ass of sec					r 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. Transactio Code (Instr. 8)	5. Number of orDerivative 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 C S (1
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (Right to Buy)	\$ 13.68	08/05/2016		A	12,600	<u>(1)</u>	08/04/2026	Common Stock	12,600	

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## **Reporting Owners**

Reporting Owner Name / Address		Relationships						
Reporting Owner Mane / Martess	Director	10% Owner	Officer	Other				
MacPhee John A C/O ADAMAS PHARMACEUTICALS, INO 1900 POWELL ST., SUITE 750 EMERYVILLE, CA 94608	С. X							
Signatures								
/s/William Dawson, as Attorney-in-Fact	08/08/2016							
<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).
- (1) The Option shares shall vest as follows: 100% of the option shares shall vest on the date 1 year from August 5, 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.