Edgar Filing: Blanchard Cheryl R - Form 4

| Form 4 | • | | | | | | | | | |
|--|---|--|-------------------------------------|---|---|---------------|---|--|--|--|
| February 28, 1 | 4 UNITED S | UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | | |
| Check this if no longe subject to Section 16 Form 4 or Form 5 obligation may contin <i>See</i> Instruct 1(b). | Filed purson s Section 17(a) | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section | | | | | | | January 31, 2005 Estimated average burden hours per response 0.5 | |
| (Print or Type R | esponses) | | | | | | | | | |
| Blanchard Cheryl R Symbol | | | r Name and Ticker or Trading | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| | | | Earliest Tra ay/Year))19 | insaction | | | X Director Officer (give below) | | 6 Owner er (specify | |
| BEDFORD, | ndment, Date Original hth/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 Person | | | | | |
| (City) | | Zip) Table | e I - Non-Do | erivative S | ecuri | ties Ac | Person quired, Disposed o | f, or Beneficial | lly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | ansaction Date 2A. Deemed th/Day/Year) Execution Date, if any (Month/Day/Year) | | 3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A) | | | SecuritiesIBeneficially(OwnedI | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| Common Stock (1) | 02/26/2019 | | Code V A | Amount 3,842 | or (D) A | Price \$ 0 | (Instr. 3 and 4) | 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)

| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 4. Transac Code (Instr. 8) | of D Se A (A D of (Ii | umber | Expiration D (Month/Day, ve es d | ; | | tle and bunt of erlying rities r. 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr |
|---|---|---|-------------------------------------|--|-------|--|--------------------|-------|--|---|---|
| | | | Code V | V (A | A) (D |) Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

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Reporting Owners

| Reporting Owner Name / Addre | 55 | Relationships | | | | | | | |
|--|------------|---------------|---------------|--|--|--|--|--|--|
| Treporting of the Traine, That o | Director | 10% Owner | Officer Other | | | | | | |
| Blanchard Cheryl R 32 WIGGINS AVENUE BEDFORD, MA 01730 | Х | | | | | | | | |
| Signatures | | | | | | | | | |
| /s/ Cheryl R. Blanchard | 02/28/2019 | | | | | | | | |
| <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) These shares represent restricted stock units. Each restricted stock unit represents a contingent right to receive one share of Anika Therapeutics, Inc. common stock. The restricted stock units vest in full on February 26, 2020.

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.