Edgar Filing: Naini Nader J - Form 4

Naini Nade Form 4 December 1										
FOR	ЛЛ	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								PPROVAL 3235-0287
Check t if no lot subject Section Form 4 Form 5 obligati may con <i>See</i> Inst 1(b).	nger to 16. or Filed pu ons section 17									Number: January 31 Expires: 2005 Estimated average burden hours per response 0.5
(Print or Type	Responses)									
1. Name and Naini Nade					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Last) 601 UNIO	^(First) N STREET, SUI	(Middle) ГЕ 3200		/Day/Year)	Transaction		_	_X Director Officer (give t elow)		% Owner her (specify
SEATTLE	(Street) , WA 98101			nendment, I Ionth/Day/Yo	Date Original ear)		A 	. Individual or Joi applicable Line) X_ Form filed by O Form filed by M terson	ne Reporting P	erson
(City)	(State)	(Zip)	Та	ble I - Non	-Derivative Sec	uritie		red, Disposed of,	or Beneficia	lly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deeme Execution I any (Month/Da	Date, if	3. Transactio Code (Instr. 8) Code V	4. Securities A onor Disposed of (Instr. 3, 4 and Amount	(D)	d (A) Price	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	12/14/2005			P	20,000,000 (1)	A	\$ 0.75 (2)	20,000,000 (1)	I	By Frazier Healthcare V, LP (1)

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)

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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)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount Underlying Securitie (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amou Numb Shares
Stock Option (right to buy)	\$ 0.69	12/14/2005		A	40,000	<u>(3)</u>	12/14/2015	Common Stock	40,
Warrants (right to buy) <u>(1)</u>	\$ 1	12/14/2005		Р	5,000,000	12/14/2005	12/14/2010	Common Stock	5,00

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Naini Nader J 601 UNION STREET, SUITE 3200 SEATTLE, WA 98101	Х					
Signatures						
/s/ Gail A. Sloan Attorney-in-fact for	Nader J.					
Naini		11	2/14/200	5		
**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).

These securities are held by Frazier Healthcare V, L.P. Mr. Naini is a managing member of FHM V, LLC (the general partner of FHM V,

- (1) L.P., which is the general partner of Frazier Healthcare V, L.P.). As a managing member of FHM V, LLC, Mr. Naini shares voting and investment powers for securities held by Frazier Healthcare V. Mr. Naini and the Frazier entities disclaim beneficial ownership of all such securities except to the extent of their proportionate pecuniary interests therein.
- (2) Acquired pursuant to that certain Securities Purchase Agreement, dated October 6, 2005.
- (3) The stock options vest and become exercisable with respect to 25% of the underlying shares on 12/14/2005 and with respect to an additional 25% of the underlying shares on each of the next three annual anniversaries thereof.

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.