Anthera Pharmaceuticals Inc

Form 4 June 16, 2014

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number:

Check this box if no longer subject to Section 16. Form 4 or

Form 5

obligations

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 30(h) of the Investment Company Act of 1940

may continue. See Instruction

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person *

Sager Philip

2. Issuer Name and Ticker or Trading Symbol

Anthera Pharmaceuticals Inc

[ANTH]

(Last) (First) 3. Date of Earliest Transaction

(Month/Day/Year) 06/13/2014

25801 INDUSTRIAL BLVD., SUIT

В

(Street)

(State)

4. If Amendment, Date Original

Filed(Month/Day/Year)

Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting

6. Individual or Joint/Group Filing(Check

5. Relationship of Reporting Person(s) to

(Check all applicable)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

Issuer

below)

Director

Officer (give title

HAYWARD, CA 94545

(City)

(Instr. 3)

1. Title of 2. Transaction Date 2A. Deemed Security

(Middle)

(Zip)

(Month/Day/Year) Execution Date, if (Month/Day/Year)

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 3, 4 and 5) (Instr. 8)

5. Amount of Securities Beneficially Owned Following Reported

6. Ownership Form: Direct (I) (Instr. 4)

7. Nature of Indirect (D) or Indirect Beneficial Ownership (Instr. 4)

10% Owner

Other (specify

OMB APPROVAL

Expires:

response...

Estimated average

burden hours per

3235-0287

January 31,

2005

0.5

(A) Transaction(s) or (Instr. 3 and 4) Code V Amount (D) Price

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.

SEC 1474 (9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Conversion 3. Transaction Date 3A. Deemed

5. Number of (Month/Day/Year) Execution Date, if TransactionDerivative

6. Date Exercisable and **Expiration Date**

7. Title and Amount of 8 Underlying Securities

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| Security (Instr. 3) | or Exercise Price of Derivative Security | | any (Month/Day/Year) | Code (Instr. 8) | Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | (Month/Day/ | Year) | (Instr. 3 and | 4) | (|
|--------------------------------------|---|------------|-------------------------|-----------------|---|---------------------|--------------------|-----------------|-------------------------------------|---|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | |
| Stock Option (right to buy) | \$ 3.35 | 06/13/2014 | | A | 18,750 | <u>(1)</u> | 06/13/2024 | Common Stock | 18,750 (1) | |
| Stock Option (right to buy) | \$ 3.35 | 06/13/2014 | | A | 12,500 | <u>(2)</u> | 06/13/2024 | Common Stock | 12,500 (2) | |

Reporting Owners

Reporting Owner Name / Address

Director 10% Owner Officer Other

Sager Philip 25801 INDUSTRIAL BLVD., SUIT B HAYWARD, CA 94545

Signatures

/s/ May Liu, by power of attorney 06/16/2014

**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) 25% of the shares subject to these options vest on the first anniversary of the vesting commencement date of 6/13/2014 and the remainder in 36 equal monthly installments thereafter.
- (2) The stock option vests and becomes exercisable in 12 equal monthly installments from the grant date of June 13, 2014.

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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