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AERIE PHARMACEUTICALS INC Form 3 July 06, 2015 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

INITIAL STATEMENT OF 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

OMB APPROVAL

OMB 3235-0104 Number: January 31, 2005 Estimated average burden hours per response... 0.5

6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting

Form filed by More than One

Person

Reporting Person

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> McHugh Julie	Statement		^g 3. Issuer Name and Ticker or Trading Symbol AERIE PHARMACEUTICALS INC [AERI]		
(Last) (First) (Middle)	06/29/2015	4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)		
C/O AERIE PHARMACEUTICALS,		(Check all applicable)			

_X__ Director

Officer

(give title below) (specify below)

10% Owner

_ Other

INC.,À 2030 MAIN STREET, SUITE 1500

(Street)

IRVINE, CAÂ 92614

(City)	(State)	(Zip)	Table I - Non-Deriv	on-Derivative Securities Beneficially Owned				
1.Title of Secu (Instr. 4)	urity		2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Reminder: Rep owned directly	-		class of securities beneficially	SEC 1473 (7-02	2)			
	Perso	ns who respo	and to the collection of					

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

1. Title of Derivative Security	2. Date Exercisable and	3. Title and Amount of	4.	5.	6. Nature of Indirect
(Instr. 4)	Expiration Date	Securities Underlying	Conversion	Ownership	Beneficial Ownership
	(Month/Day/Year)	Derivative Security	or Exercise	Form of	(Instr. 5)
		(Instr. 4)	Price of	Derivative	
			Derivative	Security:	

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Date	Expiration	Title	Amount or	Security	Direct (D)
Exercisable	Date		Number of		or Indirect
			Shares		(I)
					(Instr. 5)

Reporting Owners

Reporting Owner Name / Address	Relationships			
reporting o when runne, multips		10% Owner	Officer	Other
McHugh Julie C/O AERIE PHARMACEUTICALS, INC. 2030 MAIN STREET, SUITE 1500 IRVINE, CA 92614	ÂX	Â	Â	Â
Signatures				
Richard J. Rubino, Attorney-in-Fact for Julie McHugh	e 06/30/2015			
**Signature of Reporting Person		Da	ite	
Explanation of Response	s:			

No securities are beneficially owned

* If the form is filed by more than one reporting person, see Instruction 5(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).

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.