Adamas Pharmaceuticals Inc

Form 4

January 20, 2017

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB** Number:

Expires:

3235-0287

**OMB APPROVAL** 

January 31, 2005

0.5

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Check this box

Form 5 obligations may continue. See Instruction

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

2. Issuer Name and Ticker or Trading

Adamas Pharmaceuticals Inc

3. Date of Earliest Transaction

1(b).

(Last)

1.Title of

Security

(Instr. 3)

Common

Stock

(Print or Type Responses)

1. Name and Address of Reporting Person \* Rhodes Jennifer J

(First)

(Middle)

C/O ADAMAS PHARMACEUTICALS, INC., 1900

POWELL ST., SUITE 750

(Street)

(Zip)

2. Transaction Date 2A. Deemed

(Month/Day/Year)

01/18/2017

4. If Amendment, Date Original

Execution Date, if

(Month/Day/Year)

Symbol

[ADMS]

(Month/Day/Year)

01/18/2017

Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to

Issuer

(Check all applicable)

Director 10% Owner X\_ Officer (give title Other (specify

below)

CBO, GC & Compliance Officer

6. Individual or Joint/Group Filing(Check

Applicable Line) \_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

EMERYVILLE, CA 94608

(City) (State)

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

3. 4. Securities Acquired 5. Amount of Transaction(A) or Disposed of Code

(D) (Instr. 8) (Instr. 3, 4 and 5) Securities Beneficially Owned Following

Reported

Transaction(s) (Instr. 3 and 4) Form: Direct Indirect (D) or Indirect (I) (Instr. 4)

D

Beneficial Ownership (Instr. 4)

6. Ownership 7. Nature of

(A)

(D) Price Amount

Code V

(1)

11,250

\$0 27,187

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of **SEC 1474** information contained in this form are not (9-02)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)

#### Edgar Filing: Adamas Pharmaceuticals Inc - Form 4

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. Transactic 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)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (Right to Buy)	\$ 16.61	01/18/2017		A	67,500	(2)	01/17/2027	Common Stock	67,500

# **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Rhodes Jennifer J C/O ADAMAS PHARMACEUTICALS, INC. 1900 POWELL ST., SUITE 750 EMERYVILLE, CA 94608

CBO, GC & Compliance Officer

## **Signatures**

/s/ William J. Dawson, as
Attorney-in-Fact
01/20/2017

\*\*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) Represents the grant of restricted stock units that vest 1/4th on each of March 20, 2018, March 20, 2019, March 20, 2020 and March 20, 2021.
- (2) The shares subject to the option shall become vested according to the following schedule: 1/48th of the shares subject to the option shall vest monthly beginning on February 1, 2017 for 48 months.

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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