SADOWSKI PETER L

Form 4 May 19, 2011

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

3235-0287

Expires:

January 31, 2005

0.5

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obligations

may continue.

See Instruction

Check this box

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

1(b).

(Last)

(Print or Type Responses)

1. Name and Address of Reporting Person * SADOWSKI PETER L

2. Issuer Name and Ticker or Trading Symbol

ANTARES PHARMA, INC. [AIS]

5. Relationship of Reporting Person(s) to

Issuer

3. Date of Earliest Transaction

(Check all applicable)

(Month/Day/Year)

Director X_ Officer (give title

10% Owner

C/O ANTARES PHARMA INC, 250

(Street)

(First)

(Middle)

05/17/2011

below)

Other (specify below)

PHILLIPS BLVD, SUITE 290

4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check

Senior Vice President

Filed(Month/Day/Year)

3.

Applicable Line)

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

Person

EWING, NJ 08618

(City) (State) (Zip)

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

1.Title of Security (Instr. 3)

2. Transaction Date 2A. Deemed (Month/Day/Year)

Execution Date, if

(Month/Day/Year)

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

5. Amount of Securities Beneficially Owned Following

6. Ownership 7. Nature of Form: Direct Indirect (D) or Beneficial Indirect (I) Ownership (Instr. 4) (Instr. 4)

(A)

Reported Transaction(s) (Instr. 3 and 4)

Amount (D) Price

4. Securities Acquired

Common 05/17/2011 Stock

Code V 32,000 A <u>(2)</u> 133,221 (3) Α (1)

D

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

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SEC 1474 (9-02)

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. 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)		3 (
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (right to buy)	\$ 1.66	05/17/2011		A	51,000 (4)	(5)	05/16/2021	Common Stock	51,000	

Reporting Owners

Reporting Owner Name / Address

Relationships

Director 10% Owner Officer Other

SADOWSKI PETER L C/O ANTARES PHARMA INC 250 PHILLIPS BLVD, SUITE 290 EWING, NJ 08618

Senior Vice President

Signatures

Robert F. Apple as attorney-in-fact for Peter Sadowski

05/19/2011

**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).
- Represents the target number of shares Dr. Sadowski may receive pursuant to the terms of the performance stock unit award made to Dr.
- (1) Sadowski under the 2008 Equity Compensation Plan if certain performance goals are attained over the three-year period beginning January 1, 2011 and ending December 31, 2013 and Dr. Sadowski continues in employment with the Company through that period.
- (2) Not applicable
- (3) Represents the total number of shares owned plus all outstanding unearned or unvested shares granted less the number of shares used to fulfill tax withholding obligations when certain shares previously granted became taxable after they were earned or vested.
- (4) Represents grant of options to purchase shares of common stock, par value \$0.01 per share, issued under the Antares Pharma, Inc. 2008 Equity Compensation Plan.
- (5) The options vest in equal quarterly installments over three years.

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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