Edgar Filing: Agroskin Daniel - Form 4

| Agroskin D Form 4 | | | | | | | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|--------------------------------------------|----------------------------------------------------------------------------|--------------------------------------------------|--------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|-------------------------------------------------------------------|--|
| August 02, | ЛЛ | STATES | | | | | E COMMISSIO | N OMB | PPROVAL 3235-0287 | |
| Washington, D.C. 20549Check this box if no longer subject to Section 16.STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIESForm 4 or Form 5 obligations | | | | | | | Estimated burden hou response | January 31, 2005 average urs per | | |
| (Print or Type | e Responses) | | | | | | | | | |
| 1. Name and Address of Reporting Person <u>*</u> Agroskin Daniel | | Person <u>*</u> | 2. Issuer Name and Ticker or Trading Symbol PATHEON INC [PTI] | | | 5. Relationship of Reporting Person(s) to Issuer | | | | |
| (Last) | (Last) (First) (Middle) | | | DON INC | | | (Check all applicable) | | | |
| | (First) (| . , | | Day/Year) | Tansaction | | X Director Officer (gi below) | | % Owner her (specify | |
| (Street) | | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting | | | | |
| NEW YOI | RK, NY 10017 | | | | | | Person | More than One R | eporting | |
| (City) | (State) | (Zip) | Tal | ole I - Non-l | Derivative | Securities A | Acquired, Disposed | of, or Beneficia | lly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemo Execution any (Month/Da | Date, if | 3. Transactio Code (Instr. 8) Code V | Disposed (Instr. 3, | (A) or of (D) | 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) | |
| DILD | | C 1 1 | c | | | | · 1· /1 | | | |
| Reminder: Ro | eport on a separate lin | e for each cl | ass of sec | curities bene | Perso inforr requi | ons who res nation cont red to resp | or indirectly. spond to the colle tained in this forr ond unless the fo ntly valid OMB co | n are not orm | 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 | 2. | 3. Transaction Date | 3A. Deemed | 4. | 5. Number | 6. Date Exercisable and | 7. Title and Amount of | 8. Pri |
|-------------|-------------|---------------------|--------------------|-----------|-----------------|-------------------------|------------------------|--------|
| Derivative | Conversion | (Month/Day/Year) | Execution Date, if | Transacti | onof Derivative | Expiration Date | Underlying Securities | Deriv |
| Security | or Exercise | | any | Code | Securities | (Month/Day/Year) | (Instr. 3 and 4) | Secu |

number.

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| (Instr. 3) | Price of Derivative Security | | (Month/Day/Year) | (Instr. | | Acquire (A) or Dispose (D) (Instr. 3 and 5) | d of | | | | | (Instr |
|----------------------------|------------------------------------|------------|------------------|---------|---|------------------------------------------------------------|------|---------------------|--------------------|--------------------------------|----------------------------------------|----------|
| | | | | Code | V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | |
| Deferred Share Units | <u>(1)</u> | 07/29/2011 | | А | | 7,778 | | <u>(1)</u> | <u>(1)</u> | Restricted Voting Shares | 7,778 | <u>(</u> |

Reporting Owners

| Reporting Owner Name / Address | | Relationsh | | |
|-----------------------------------------------------------------------------|----------|------------|---------|-------|
| reporting officer rando fradeos | Director | 10% Owner | Officer | Other |
| Agroskin Daniel 450 LEXINGTON AVENUE 31ST FLOOR NEW YORK, NY 10017 | Х | Х | | |
| Signatures | | | | |
| /s/ David S Field, Attorney-in-fact | 0 | 8/02/2011 | | |
| <u>**Signature of Reporting Person</u> | | 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) Each deferred share unit ("DSU") entitles its holder, upon ceasing to be a director, to receive an amount of cash having the same value as one restricted voting share of Patheon Inc. at such time.

The DSUs credited to the director's account consist of (i) 3,715 DSUs for retainer fees that are required to be paid to the director in the form of DSUs and (ii) 4,063 DSUs for retainer fees that the director has elected to be paid in the form of DSUs. The number of DSUs

(2) acquired by the director was based on the weighted-average price at which the Company's restricted voting shares traded on the Toronto Stock Exchange on July 28, 2011 and July 29, 2011 (the two trading days prior to the acquisition date), which was \$2.15 (as converted from C\$2.05 using the average of the closing rates of exchange from Reuters on July 28 and July 29, 2011).

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.