## Edgar Filing: ANTARES PHARMA, INC. - Form 4

ANTARES P	HARMA, INC.								
Form 4									
September 05									
FORM	4 UNITED S					COMMISSIO		9PROVAL 3235-0287	
if no longe subject to Section 16 Form 4 or Form 5 obligation may contin	Section 16.SECURITIESForm 4 orForm 5Form 5Filed 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 SectionSee Instruction30(h) of the Investment Company Act of 1940						Expires: Estimated a burden hou response	Expires:January 312005Estimated averageburden hours perresponse0.5	
(Print or Type Ro	esponses)								
1. Name and Ac GUETH AN	ldress of Reporting Po TON	Symb	suer Name <b>and</b> ol ARES PHAI		Ū.	Issuer	of Reporting Per eck all applicable		
	(First) (Mi EES PHARMA, RINCETON SOU	(Mont 09/0	e of Earliest Tra h/Day/Year) 8/2013	ansaction		X Director Officer (giv below)	10%	6 Owner er (specify	
	(Street)		mendment, Da Month/Day/Year)	-		Applicable Line)	Joint/Group Filin y One Reporting Po		
EWING, NJ	08628						More than One Re		
(City)	(State) (Z	Zip) T	able I - Non-D	erivative S	ecurities Ac	equired, Disposed	of, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Code	omr Dispos (Instr. 3,	(A) or	I (A) 5. Amount of Securities Beneficially Owned Following Reported Transaction (Instr. 3 and	Ownership Form: Direct (D) or Indirect (I) (s) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
COMMON STOCK	09/03/2013		S <u>(1)</u>	25,000	$\begin{array}{c} (D) \\ D \\ 4.42 \end{array}$	245 976	D		

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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			Amou Under Secur	le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships						
	Director	10% Owner	Officer	Other			
GUETH ANTON C/O ANTARES PHARMA, INC. 100 PRINCETON SOUTH, SUITE 300 EWING, NJ 08628	Х						
Signatures							
Robert F. Apple as attorney-in-fact for An Gueth	09/05/2013						
**Signature of Reporting Person	Date						
Explanation of Respond	202						

## 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) The sale of common stock reported in this Form 4 was effected pursuant to a Rule 10b5-1 trading plan.

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.