Edgar Filing: Sarepta Therapeutics, Inc. - Form 4

Sarepta The	rapeutics, Inc.									
Form 4										
March 16, 2	016									
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL		
	UNITED		URITIES AND EXCHANGE COMMISSION Vashington, D.C. 20549					OMB 3235- Number:	3235-0287	
Check th if no lon subject t Section Form 4 c	ger o STATEN 16. or	IENT OF CHA	SECURI	TIES				Expires: Estimated a burden hour response	•	
Form 5 obligation may con <i>See</i> Instr 1(b).	tinue. Section 17(suant to Section a) of the Public V 30(h) of the I	Utility Holdi	ing Com	npany	Act of 1	1935 or Section			
(Print or Type	Responses)									
							5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (1	Middle) 3. Date	of Earliest Tra	nsaction	-	-	(Check	all applicable)	
(Mor			onth/Day/Year) /14/2016				X_ Director10% Owner Officer (give titleOther (specify below) below)			
	(Street)		nendment, Date onth/Day/Year)	e Original		1	 Individual or Join Applicable Line) _X_ Form filed by Or 	ne Reporting Per	son	
CAMBRID	GE, MA 02142					Ī	Form filed by Mo Person	ore than One Re	porting	
(City)	(State)	(Zip) Ta	ble I - Non-De	erivative S	Securit	ties Acqu	ired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr. 3, 4	d of (È))	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	03/14/2016		Code V A P 4		(D) Δ \$	Price 5 16.6987	(Instr. 3 and 4) 42,830	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)					7. Title and Amount of Underlying Securities (Instr. 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

Reporting Owner Name / Address				
Reporting o wher runter runters	Director	10% Owner	Officer	Other
Price Ben Gil 215 FIRST STREET, SUITE 415 CAMBRIDGE, MA 02142	Х			
Signatures				
/s/David Tyronne 03 Howton 03	03/16/2016			
**Signature of Reporting Person	Date			
Evenlage attended Dee				

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).

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.