Edgar Filing: DEPOMED INC - Form 4

DEDOMED INC

Form 4												
March 06, 20 FORM Check this if no long subject to Section 16 Form 4 or Form 5 obligation may conti <i>See</i> Instru 1(b).	4 UNITED	CMENT O ursuant to 3 7(a) of the	Was F CHAN Section 10	hington, GES IN 1 SECUR 6(a) of the ility Hold	D.C. 20 BENEFI ITIES e Securit ling Com	549 CIA ies Ez ipany	L OW schang Act o	COMMISSION NERSHIP OF ge Act of 1934, f 1935 or Sectio 40	OMB Number: Expires: Estimated a burden hou response	irs per		
(Print or Type R	esponses)											
			2. Issuer Name and Ticker or Trading Symbol DEPOMED INC [DEPO]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) 7999 GATE 300	(First) WAY BLVD.,	(Middle)	3. Date of (Month/D 03/06/20		ansaction			X Director Officer (give below)	10%	b Owner er (specify		
				nendment, Date Original onth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
NEWARK, O	CA 94560							Form filed by M Person				
(City)	(State)	(Zip)	Table	e I - Non-D	erivative	Securi	ties Acc	quired, Disposed o	f, or Beneficial	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	ar) Executio any	emed on Date, if Day/Year)	Code (Instr. 8)	4. Securi on(A) or Di (D) (Instr. 3,	ispose	d of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
Common Stock	03/06/2013			Р	2,000	А	\$ 5.96	8,000	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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Tit	le and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration D	Date	Amou	int of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	/Year)	Unde	rlying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)	Bene
	Derivative		• •		Securities			(Instr	. 3 and 4)		Owne
	Security				Acquired			,			Follo
	5				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						(
					4, and 5)						
					i, una o)						
									Amount		
						Date	Expiration		or		
						Exercisable	-	Title Num	Number		
						Exercisable	Date		of		
				Code V	(A) (D)				Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships								
1 5	Director 10% Owner		Officer Other						
DAWES KAREN A 7999 GATEWAY BLVD., SUITE 300 NEWARK, CA 94560	Х								
Signatures									
Matthew M. Gosling, Attorney-in-Fact for Karen A.									
Dawes			03/06	/2013					
**Signature of Reporting Person			D	ate					
Evelopetion of Deener									

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.