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

HORIZON E Form 4	PHARMA, INC.									
December 0	9, 2011									
FORM	14								PPROVAL	
Washington, D.C. 20549									3235-0287	
Check this box if no longer STATENTENT OF CHANCES IN DENEELCIAL								Expires:	January 31, 2005	
subject t Section Form 4 o Form 5		F CHANGES IN BENEFICIAL OWNERSHI SECURITIES Section 16(a) of the Securities Exchange Act of 1					Estimated burden hor response	average urs per		
obligatic may con <i>See</i> Instr 1(b).	tinue. Section 17	(a) of the	Public U	tility Hol	ding Cor		of 1935 or Sectio	on		
(Print or Type	Responses)									
1. Name and Address of Reporting Person <u>*</u> SHERMAN JEFFREY W			2. Issuer Name <b>and</b> Ticker or Trading Symbol HORIZON PHARMA, INC. [HZNP]			Issuer				
(1 +)	(First) (	Middle)				NC. [HZIN]	(Check all applicable)			
(Last) C/O HORIZ INC., 520 I SUITE 520	3. Date of Earliest Transaction (Month/Day/Year) 12/08/2011			Director  10% Owner   X Officer (give title  Other (specify below)    below)  below)    EVP & Chief Medical Officer						
DEERFIEL	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 Person						
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Securities A	cquired, Disposed o	f, or Beneficia	ally Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	Date, if	3. Transactio Code (Instr. 8)	Disposed (Instr. 3, 4	(A) or of (D) 4 and 5) (A) or	SecuritiesIBeneficially(Owned(	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	(D) Price	(			
Reminder: Rep	port on a separate line	e for each c	lass of secu	urities benef	-	-	-			
					inforn requir	nation cont ed to response ays a curre	spond to the collect tained in this form ond unless the for ntly valid OMB cor	are not m	SEC 1474 (9-02)	
	Tab					posed of, or convertible	Beneficially Owned securities)			
1. Title of	2. 3. Tra	ansaction Da	ate 3A. D	eemed	4.	5. Numb	er of 6. Date Exerc	sisable and	7. Title and Amount	

Conversion (Month/Day/Year) Execution Date, if TransactionDerivative

Derivative

of Underlying

Expiration Date

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8	() ()	Securities Acquired or Dispose (D) (Instr. 3, 4 and 5)	(A) ed of	(Month/Day/Year)		Securities (Instr. 3 and 4)	
				Code V	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee stock options (right to buy)	\$ 4.96	12/08/2011		А		53,621		(1)	12/07/2021	common stock	53,621
Restricted stock units	(2)	12/08/2011		А		32,832		(3)	(3)	common stock	32,832

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
FB	Director	10% Owner	Officer	Other			
SHERMAN JEFFREY W C/O HORIZON PHARMA, INC. 520 LAKE COOK ROAD, SUITE 520 DEERFIELD, IL 60015			EVP & Chief Medical Officer				
Signatures							
/s/ Robert J. De Vaere, Attorney-In-Fact	12/0	)9/2011					

<u>\*\*</u>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).
- (1) The shares subject to the option vest and become exercisable in forty-eight equal monthly installments from the vesting commencement date of December 8, 2011.
- (2) Each restricted stock unit represents a contingent right to receive one share of Horizon Pharma, Inc. common stock.
- (3) The restricted stock units vest in four equal annual installments beginning December 8, 2012.

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.