## Edgar Filing: Capnia, Inc. - Form 4

Capnia, Inc.											
Form 4 January 13, 201	5										
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FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed 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 Section 30(h) of the Investment Company Act of 1940								N OMB Number:	3235-0287		
								Estimated burden hou response	Estimated average burden hours per response 0.5		
(Print or Type Resp	oonses)										
1. Name and Address of Reporting Person <u>*</u> MARIO ERNEST			2. Issuer Name <b>and</b> Ticker or Trading Symbol Capnia, Inc. [CAPN]			Trading	5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First) (1	Middle)	3. Date of Earliest Transaction				(Check all applicable)				
3 TWIN DOLPHIN DRIVE, SUITE 160			(Month/Day/Year) 01/11/2015				_X_ Director _X_ 10% Owner Officer (give titleOther (specify below) below)				
(Street) REDWOOD CITY, CA 94065			4. If Amendment, Date Original Filed(Month/Day/Year)			<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>					
							Person				
(City)	(State)	(Zip)	Tab	ole I - Non-I	Derivative	Securities A	cquired, Disposed	of, or Beneficia	lly Owned		
	Transaction Date onth/Day/Year)	2A. Deema Execution any (Month/Da	Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3, 4	(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)		
Reminder: Report	on a separate line	for each cl	ass of sec	urities benet	ficially ow	ned directly	or indirectly.				
					Perso inform requir	ons who res nation cont red to resp ays a curre	n are not rm	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
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	nof Derivative	Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8	3)	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)					
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amoun or Number of Shares
Employee Stock Option	\$ 1.8	01/11/2015		А		5,000		01/11/2016(1)	01/11/2025	Common Stock	5,000

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
<b>r</b> g	Director	10% Owner	Officer	Other			
MARIO ERNEST 3 TWIN DOLPHIN DRIVE, SUITE 160 REDWOOD CITY, CA 94065	Х	Х					
Signatures							
/s/ David O'Toole, Attorney-in-Fact	01/13/2015	i					
**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).
- Beginning on January 11, 2016, twenty-five percent (25%) of the shares subject to the Option shall vest immediately and additional (1) twenty-five percent (25%) of the total shares subject to the Option shall vest annually thereafter on the same day of the month as the date
- of grant, subject to Optionee's continuing to be a Service Provider on such dates.

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.