Edgar Filing: Perkins Adelene Q - Form 4

Form 4	ne Q											
January 07, 20										OMB A	PPROVA	AL
	FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							ON	OMB Number:	3235-0287		
Check this if no longe subject to Section 16 Form 4 or Form 5	r STATEI	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,								Expires:January 31, 2005Estimated average burden hours per response0.5		
obligations may contin <i>See</i> Instruc 1(b).	Section 17	(a) of the I	Public U		ding Co	npany A	ct of 1					
(Print or Type Re	esponses)											
Perkins Adelene Q Symbol INFIN				suer Name and Ticker or Trading ol NITY PHARMACEUTICALS, [INFI]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) C/O INFINIT PHARMACE MEMORIAL	TY EUTICALS, IN	(Middle) C., 784	3. Date of	of Earliest T Day/Year)	ransaction			_X Director _X Officer (clow) Ch	(give t		% Owner her (specify cer	7
				mendment, Date Original 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 				
(City)	(State)	(Zip)						erson				
		· • ·					_	. –		or Beneficia	-	
1.Title of Security 2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if any (Month/Day/Year)			Date, if	TransactionAcquired (A) or Code Disposed of (D) H (Instr. 8) (Instr. 3, 4 and 5) G (A) H (A) T				mount of urities eficially ed owing orted usaction(s) r. 3 and 4)	Fo (D (I)	Ownership rm: Direct) or Indirect (str. 4)	7. Nature Indirect Beneficia Ownersh (Instr. 4)	al 1ip
				Code V		(D) Pric	ce					
Reminder: Report	rt on a separate lin	e for each cla	ass of sec	urities bene	ficially ow	ned directl	ly or indi	rectly.				

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)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transact Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (right to buy)	\$ 1.24	01/04/2019		А	243,000	<u>(1)</u>	01/04/2029	Common Stock	243,000

Reporting Owners

Reporting Owner Name / Address		Relationships						
	Director	10% Owner	Officer	Other				
Perkins Adelene Q C/O INFINITY PHARMACEUTICALS, INC. 784 MEMORIAL DRIVE CAMBRIDGE, MA 02139		Х		Chief Executive Officer				
Signatures								
/s/ Adelene Q. Perkins	01/07/2019							

<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 option vests as to 1/48th of the shares on January 31, 2019 and vests as to 1/48th of the shares at the end of each calendar month thereafter.

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.