Flexion Therapeutics Inc Form 3 February 11, 2014 **FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION** Washington, D.C. 20549 OMB APPROVAL OMB Number: 3235-0104

INITIAL STATEMENT OF 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

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> Sofinnova Partners SAS			2. Date of Event I Statement (Month/Day/Year	1 0	3. Issuer Name and Ticker or Trading Symbol Flexion Therapeutics Inc [FLXN]					
	, , , , , , , , , , , , , , , , , , ,	liddle)	02/11/2014		4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)		
16-18 RUE DE 4 (Sti PARIS, IO 75	reet)	1BRE		:	(Check Director Officer (give title below	all applicable) X 10% (Other) (specify belo		Filing(Ch _X_ Form Person	lual or Joint/Group eck Applicable Line) filed by One Reportir filed by More than Or Person	C
(City) (St	ate) (Zip)	Ta	ble I - N	on-Derivati	ive Securition	es Bei	neficially	y Owned	
1.Title of Security (Instr. 4)			Be	Amount of eneficially C listr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nat Owne (Instr.	rship	irect Beneficial	
Reminder: Report on owned directly or ind		ine for eac	ch class of securiti	es beneficia	^{illy} SI	EC 1473 (7-02))			
	information information in the second s	on conta to respor	ond to the colle ined in this form nd unless the fo IB control numb	n are not orm displa	ys a					
Table	II - Derivat	ive Securi	ities Beneficially	Owned (e.g	g., puts, calls,	warrants, opt	ions, c	onvertible	securities)	
1. Title of Derivative	e Security	2. Date	Exercisable and	3. Title an	d Amount of	4.	5		6. Nature of Indi	irect

1. Title of Derivative Security	2. Date Exercisable and		3. Title and Amount of		4.	5.	6. Nature of Indirect	
(Instr. 4)	Expiration Date		Securities Underlying		Conversion	ersion Ownership	Beneficial Ownership	
	(Month/Day/Year)		Derivative Security		or Exercise	Form of	(Instr. 5)	
			(Instr. 4)		Price of	Derivative		
	Date Exercisable	Expiration Date		Derivative Secur		Security:		
			Title	Amount or Number of	Security	Direct (D)		
						or Indirect		
						(I)		
				Shares		(Instr. 5)		

January 31,

2005

0.5

Expires:

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Series A Preferred Stock				1,614,382 (2)	\$ 0 <u>(1)</u>	D	Â
Series B Preferred Stock	(3)	(3)	Common Stock	260,340 <u>(2)</u>	\$ 0 <u>(3)</u>	D	Â

Reporting Owners

Reporting Owner Name / Address		Relations			
	Director	10% Owner	Officer	Other	
Sofinnova Partners SAS 16-18 RUE DE 4 SEPTEMBRE PARIS, I0 75002	Â	ÂX	Â	Â	
Signatures					
/s/Rafaele Tordjman, managing partner of Sofinnova Partners SAS					02/11/2014
**Signature of Reporting Person					Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, *see* Instruction 5(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).

The shares of Series A Preferred Stock have no expiration date and are convertible at any time at the election of the holder without
(1) payment of further consideration. Each share of Series A Preferred Stock will automatically convert on a 1-for-8.13 basis into shares of Common Stock upon the closing of the Issuer's initial public offering.

Share numbers assume or give effect to the 1-for-8.13 reverse stock split of the Issuer's Common Stock effected on January 27, 2014,(2) which will be effective for the Preferred Stock upon its conversion to Common Stock immediately prior to the closing of the Issuer's initial public offering.

The shares of Series B Preferred Stock have no expiration date and are convertible at any time at the election of the holder without

(3) payment of further consideration. Each share of Series B Preferred Stock will automatically convert on a 1-for-8.13 basis into shares of Common Stock upon the closing of the Issuer's initial public offering.

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.