Cara Therapeutics, Inc. Form 4

March 10, 2017

### FORM 4

#### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

Form 4 or Form 5 obligations may continue. See Instruction

1(b).

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

2. Issuer Name and Ticker or Trading

(Print or Type Responses)

1. Name and Address of Reporting Person \* CHALMERS DEREK T

Symbol Cara Therapeutics, Inc. [CARA]

(Middle)

5. Relationship of Reporting Person(s) to

(Check all applicable)

President & CEO

Issuer

below)

(Last) (First) 3. Date of Earliest Transaction

4. If Amendment, Date Original

\_X\_\_ Director 10% Owner

C/O CARA THERAPEUTICS. INC., 107 ELM STREET, 9TH **FLOOR** 

03/08/2017

X\_ Officer (give title Other (specify

**OMB APPROVAL** 

3235-0287

January 31,

2005

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OMB

Number:

Expires:

response...

Estimated average

burden hours per

(Month/Day/Year)

6. Individual or Joint/Group Filing(Check

(Instr. 4)

Filed(Month/Day/Year)

Applicable Line) \_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

STAMFORD, CT 06902

(City) (State) (Zip)

(Street)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)

2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if (Month/Day/Year)

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 3, 4 and 5) (Instr. 8)

5. Amount of Securities Beneficially Owned Following

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial Ownership (I)

(Instr. 4)

(A) or

Reported Transaction(s) (Instr. 3 and 4)

Code V Amount (D) Price

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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 Derivative

Conversion

3. Transaction Date 3A. Deemed (Month/Day/Year) Execution Date, if

5. Number of TransactionDerivative

6. Date Exercisable and **Expiration Date** 

7. Title and Amount of **Underlying Securities** 

#### Edgar Filing: Cara Therapeutics, Inc. - Form 4

Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	Securities Acquired (ADisposed of (Instr. 3, 4, 5)	f(D)			(Instr. 3 and 4)	
				Code V	7 (A)	(D)	Date Exercisable	Expiration Date	Title	Amount Number Shares
Employee Stock Option (Right to Buy)	\$ 17.41	03/08/2017		A	225,000		<u>(1)</u>	03/08/2027	Common Stock	225,00

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
reporting 6 wher runne, radiess	Director	10% Owner	Officer	Other				
CHALMERS DEREK T C/O CARA THERAPEUTICS, INC. 107 ELM STREET, 9TH FLOOR STAMFORD, CT 06902	X		President & CEO					

# **Signatures**

/s/Darren DeStefano, Attorney-in-Fact 03/10/2017

\*\*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).
- The shares shall vest and become exercisable in a series of 48 successive equal monthly installments beginning on April 8, 2017, in each
  (1) case subject to the Reporting Person's Continuous service (as that term is defined in the Issuer's 2014 Equity Incentive Plan) as of each such date

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.

Reporting Owners 2