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DEPOMEI	D INC								
Form 4 February 10	0, 2017								
•									PPROVAL
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						N OMB Number:	3235-0287		
Check if no lo	this box							Expires:	January 31, 2005
subject to STATEMENT OF CHANGE					GES IN BENEFICIAL OWNERSHIP OF SECURITIES				average urs per
Form 5 obligat may co <i>See</i> Ins 1(b).	ions Section 17(a) of the H	Public U		ding Coi	npany Ac	ange Act of 1934, et of 1935 or Secti 1940		
(Print or Type	e Responses)								
1. Name and Address of Reporting Person <u>*</u> Schoeneck James A			2. Issuer Name and Ticker or Trading Symbol DEPOMED INC [DEPO]			5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (I	Middle)			-	1	(Che	eck all applicabl	e)
C/O DEPOMED, INC., 7999 GATEWAY BOULEVARD, SUITE 300			3. Date of Earliest Transaction (Month/Day/Year) 02/08/2017			X Director 10% Owner X Officer (give title Other (specify below) below) President and CEO			
(Street)			4. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check			
NEWARK, CA 94560			Filed(Month/Day/Year)			Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting			
							Person		
(City)	(State)	(Zip)	Tal	ble I - Non-l	Derivative	Securities	Acquired, Disposed	of, or Beneficia	lly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	Date, if	3. Transactio Code (Instr. 8)	Disposed	(A) or of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 2 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code V	Amount	(D) Price	e (Instr. 3 and 4)		
Reminder: R	eport on a separate line	e for each cla	ass of sec	curities bene	ficially ow	ned directly	or indirectly.		
					Perso inforr requi	ons who re nation cor red to resp ays a curre	espond to the colle ntained in this form oond unless the fo ently valid OMB co	n are not rm	SEC 1474 (9-02)
	Tab			curities Acq ls, warrants			r Beneficially Owned e securities)	1	
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1. Title of
Derivative2.3. Transaction Date3A. Deemed4.5. Number of
TransactionDerivative6. Date Exercisable and
Expiration Date7. Title and Amount of
Underlying Securities

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	Securities Acquired (A Disposed of (Instr. 3, 4, 4, 5)	f (D)	(Month/Day	'Year)	(Instr. 3 and 4	4)
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount Number Shares
Restricted Stock Units	<u>(1)</u>	02/08/2017		А	105,000		(2)	(2)	Common Stock	105,00
Stock Options	\$ 17.09	02/08/2017		А	245,000		(3)	02/08/2027	Common Stock	245,00

Reporting Owners

Reporting Owner Name / Address	Relationships				
	Director	10% Owner	Officer	Other	
Schoeneck James A C/O DEPOMED, INC. 7999 GATEWAY BOULEVARD, SUITE 300 NEWARK, CA 94560	Х		President and CEO		
Signatures					

/s/ James A.	02/10/2017			
Schoeneck	02/10/2017			
<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).
- Each restricted stock unit represents the contingent right to receive one share of common stock upon vesting of the unit. (1)
- These restricted stock units are scheduled to vest 25% on December 1, 2017, 25% on December 1, 2018, 25% on December 1, 2019, and (2) 25% on December 1, 2020, assuming continued employment through the applicable vesting date.
- (3) These stock options are exercisable in 48 equal monthly installments.

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.