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FIVE PRIME THERAPEUTICS INC

Form 3 June 24, 2015

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

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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 2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol Person * Statement FIVE PRIME THERAPEUTICS INC [FPRX] A Wong Brian Russell (Month/Day/Year) 06/12/2015 (Last) (First) (Middle) 4. Relationship of Reporting 5. If Amendment, Date Original Person(s) to Issuer Filed(Month/Day/Year) C/O FIVE PRIME (Check all applicable) THERAPEUTICS, INC., TWO CORPORATE DRIVE 10% Owner Director (Street) _X__ Officer Other 6. Individual or Joint/Group (give title below) (specify below) Filing(Check Applicable Line) SVP, Research _X_ Form filed by One Reporting Person **SOUTH SAN** Form filed by More than One FRANCISCO, Â CAÂ 94080 Reporting Person (City) (State) (Zip) Table I - Non-Derivative Securities Beneficially Owned 1. Title of Security 2. Amount of Securities 3. 4. Nature of Indirect Beneficial Beneficially Owned Ownership Ownership (Instr. 4) (Instr. 4) Form: (Instr. 5) Direct (D) or Indirect (I) (Instr. 5) 22,738 (1) Â Common Stock D Reminder: Report on a separate line for each class of securities beneficially SEC 1473 (7-02) owned directly or indirectly. Persons who respond to the collection of

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

information contained in this form are not required to respond unless the form displays a

currently valid OMB control number.

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

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	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Security	Direct (D) or Indirect (I) (Instr. 5)	
Employee Stock Option (right to buy)	(2)	02/12/2019	Common Stock	338	\$ 4.56	D	Â
Employee Stock Option (right to buy)	(2)	07/28/2020	Common Stock	11,788	\$ 6.89	D	Â
Employee Stock Option (right to buy)	(3)	07/13/2021	Common Stock	9,756	\$ 8.49	D	Â
Employee Stock Option (right to buy)	(4)	07/15/2022	Common Stock	32,520	\$ 5.54	D	Â
Employee Stock Option (right to buy)	(5)	07/18/2023	Common Stock	20,324	\$ 7.26	D	Â
Employee Stock Option (right to buy)	(6)	08/21/2024	Common Stock	20,000	\$ 11.14	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships				
Fg	Director	10% Owner	Officer	Other	
Wong Brian Russell C/O FIVE PRIME THERAPEUTICS, INC. TWO CORPORATE DRIVE SOUTH SAN FRANCISCO, CA 94080	Â	Â	SVP, Research	Â	

Signatures

/s/ Marc Belsky, Attorney-in-Fact 06/22/2015

**Signature of Reporting Person Dat

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).
- (1) Includes 4,640 shares of restricted stock, which will vest fully on January 3, 2017, provided the reporting person remains employed by the Company through such date.
- (2) This option is fully vested and immediately exercisable.
- (3) This option began vesting on August 14, 2011, at a rate of 1/48th per month.
- (4) This option began vesting on August 12, 2012, at a rate of 1/48th per month.
- (5) This option began vesting on August 19, 2013, at a rate of 1/48th per month.
- (6) This option began vesting on September 22, 2014, at a rate of 1/48th per month.

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.

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