SEC Form 4

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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| Check this box if no longer subject to |
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| Section 16. Form 4 or Form 5 |
| obligations may continue. See |
| Instruction 1(b). |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL OMP Number 2225 0207

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|------------------------|-----------|
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| hours per response: | 0.5 |
| | |

| 1. Name and Address of Reporting Person [*] Chivukula Pad | | | | er Name and Ticker <mark>urus Therapeu</mark> | | | (Check | tionship of Reporting Person(s) to Issuer all applicable) Director 10% Owner Officer (give title Other (specify | | | |
|---|--|------------------|------------------|---|------------------|-----------------------------|------------------------|--|------------------|----------|--|
| (Last) 10628 SCIENCE | st) (First) (Middle) 528 SCIENCE CENTER DRIVE, #250 | | 3. Date 02/07 | e of Earliest Transac /2019 | tion (Month/D | ay/Year) | | below) below Chief Scientific Officer & C | | | |
| (Street) SAN DIEGO | СА | 92121 | 4. If An | nendment, Date of C | Driginal Filed (| Month/Day/Year) | 6. Indiv Line) X | idual or Joint/Group Form filed by One Form filed by Mor Person | e Reporting Pers | on | |
| (City) | (State) | (Zip) | | | | | | | | | |
| | Tal | ble I - Non-Deri | vative S | ecurities Acqu | iired, Disp | osed of, or Benefi | cially (| Owned | | | |
| | (In atr. 2) | 2 Tron | esetion | 24 Deemed | 2 | 4 Converting Approximat (A) | | E. Amount of | C. Ourrenabin | 7 Nature | |

| | 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transa Code (8) | ction | 4. Securities / Disposed Of (5) | | | Securities | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
|--|---------------------------------|--|---|------------------------------|-------|--|---------------|-------|------------------------------------|---|---|--|
| | | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (1130.4) | |

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

| | (eigi, pare, care, marane, epitere, contentine coountee) | | | | | | | | | | | | | | |
|---|---|--|---|------------------------------|---|--|---------------------------------|--|---|-----------------|---|--|--|--|--|
| 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. Transa Code (8) | | 5. Numl of Derivati Securiti Acquire (A) or Dispose of (D) (I 3, 4 and | ive ies ed ed nstr. | 6. Date Exerc Expiration Da (Month/Day/Y | I 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |
| Incentive Stock Option (right to buy) | \$4.99 | 02/07/2019 | | A | | 1,667 | | (1) | 02/06/2029 | Common Stock | 1,667 | \$4.99 | 1,667 | D | |
| Non- Qualified Stock Option (right to buy) | \$4.99 | 02/07/2019 | | A | | 38,333 | | (1) | 02/06/2029 | Common Stock | 38,333 | \$4.99 | 38,333 | D | |

Explanation of Responses:

1. Vesting over a period of four years from Vest Base Date, with 25% of the options vesting on the first anniversary thereof and the remainder vesting in equal monthly installments thereafter.

Padmanabh Chivukula

** Signature of Reporting Person

02/11/2019 Date

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

* 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.