Edgar Filing: INVIVO THERAPEUTICS HOLDINGS CORP. - Form 4

INVIVO THERAPEUTICS HOLDINGS CORP.

Form 4

Common

Stock

12/10/2014

December 11, 2014

December 11	, 2014								
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION							OMB APPROVAL		
I OI tivi	UNITED S	STATES			ND EXCHANGE (COMMISSION	OMB	2025 0207	
ar 1 1.			Was	hington,	D.C. 20549		Number:	3235-0287	
Check this							Expires:	January 31,	
if no long subject to	C. I. V. I. M. IV.	ENT OF	F CHANGES IN BENEFICIAL OWNERSHIP OF				•	2005	
Section 16	SECURITIES					Estimated average burden hours per			
Form 4 or						response	0.5		
Form 5	Filed purs	suant to S	ection 16	5(a) of the	Securities Exchang	ge Act of 1934,			
obligation	Section 17(a				ling Company Act o		1		
may conti See Instru	nue.			•	Company Act of 194				
1(b).	ction	0 0 ()							
1(0).									
(Print or Type R	desponses)								
1. Name and A	ddress of Reporting F	Person *	2. Issuer Name and Ticker or Trading Symbol INVIVO THERAPEUTICS			5. Relationship of Reporting Person(s) to Issuer			
PERRIN MA									
			HOLDINGS CORP. [NVIV]			(Check all applicable)			
(T. .).	(T')				-	W D'	100		
(Last)	(First) (M			Earliest Tra	ansaction	X Director X Officer (give		Owner er (specify	
C/O INVINO THED A DELITICS			(Month/Day/Year)			below) below)			
C/O INVIVO THERAPEUTICS HOLDINGS CORP., ONE			12/10/2014			CHIEF EXECUTIVE OFFICER			
		7							
	SQUARE, SUITI	ī.							
B14402									
(Street)			4. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check Applicable Line)			
			Filed(Month/Day/Year)						
						X Form filed by O			
CAMBRIDO	GE, MA 02139					Form filed by M Person	ore than One Re	porting	
(C:tv:)	(Stata)	(Zin)							
(City)	(State) ((Zip)	Table	e I - Non-D	erivative Securities Acc	quired, Disposed of,	or Beneficial	ly Owned	
1.Title of	2. Transaction Date	2A. Deen	ned	3.	4. Securities Acquired	5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Year)	Execution	n Date, if		on(A) or Disposed of		Form: Direct	Indirect	
(Instr. 3)		any		Code	(D)	•	(D) or	Beneficial	
		(Month/D	oay/Year)	(Instr. 8)	(Instr. 3, 4 and 5)		Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
						Reported	(111801.4)	(IIISU. 4)	
					(A)	The discontinuation of the control o			

Code V Amount

A

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

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 control number.

SEC 1474

(9-02)

D

Transaction(s) (Instr. 3 and 4)

57,142

(A)

(D)

57,142 A

Price

<u>(1)</u>

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

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. Transaction Code (Instr. 8)	5. Number of 6. Date Exercisable and Expiration Date Securities (Month/Day/Year) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (Right To Buy)	\$ 1.05	12/10/2014		A	500,000	<u>(2)</u>	12/10/2024	Common Stock	500,000

Reporting Owners

Reporting Owner Name / Address	Relationships				
. 0	Director	10% Owner	Officer	Other	
PERRIN MARK D C/O INVIVO THERAPEUTICS HOLDINGS CORP. ONE KENDALL SQUARE, SUITE B14402 CAMBRIDGE, MA 02139	X		CHIEF EXECUTIVE OFFICER		

Signatures

/s/ Elizabeth W. Fraser, Attorney-in-Fact

**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).
- (1) Represents shares of common stock received as a component of an incentive bonus payment.
- (2) The option is exercisable as to 25% of the shares on the first anniversary of the date of grant, and the remaining shares vest thereafter on a monthly basis in 36 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.

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