TREVENA INC Form 4 March 19, 2015

## FORM 4

Form 5

1(b).

obligations

may continue.

See Instruction

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

Check this box if no longer subject to

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** Section 16. Form 4 or

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

**OMB APPROVAL** 

OMB Number:

3235-0287

Expires:

January 31, 2005

Estimated average burden hours per

response... 0.5

(Print or Type Responses)

1. Name and Address of Reporting Person \* Soergel David

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to

Issuer

TREVENA INC [TRVN]

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

Director 10% Owner

(Month/Day/Year)

03/17/2015

X\_ Officer (give title Other (specify below) below)

(Check all applicable)

C/O TREVENA, INC., 1018 WEST 8TH AVENUE, SUITE A

(Street)

4. If Amendment, Date Original

Sr. VP, Clinical Dev. & CMO 6. Individual or Joint/Group Filing(Check

Applicable Line)

Filed(Month/Day/Year) \_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

KING OF PRUSSIA, PA 19406

(State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

Person

1.Title of Security (Month/Day/Year) (Instr. 3)

(City)

2. Transaction Date 2A. Deemed 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 (T)

Ownership (Instr. 4) (Instr. 4)

(A)

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 Security

Conversion or Exercise

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

Execution Date, if any

4. 5. Number of **Transaction**Derivative Code Securities

6. Date Exercisable and **Expiration Date** (Month/Day/Year)

7. Title and Amount of **Underlying Securities** (Instr. 3 and 4)

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(Instr. 3) Price of (Month/Day/Y Derivative Security

(Month/Day/Year) (Instr. 8) Acquired (A) or Disposed of

(D) (Instr. 3, 4, and 5)

Code V (A)

(D) Date Expiration Title Exercisable Date

or Number

Amount

of Shares

Employee

Stock
Option
(Right to

Buy)

\$ 6.79 03/17/2015

A 87,500

<u>(1)</u> 03/17/2025

Common Stock 87,500

Reporting Owners

**Reporting Owner Name / Address** 

Relationships

Director 10% Owner Officer

Other

Soergel David C/O TREVENA, INC. 1018 WEST 8TH AVENUE, SUITE A KING OF PRUSSIA, PA 19406

Sr. VP, Clinical Dev. & CMO

## **Signatures**

/s/Derek Colla, Attorney-in-Fact

03/19/2015

\*\*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 option shall vest and become exercisable with respect to one-fourth of the total number of shares subject to the option on each of (1) March 17, 2016, March 17, 2017, March 17, 2018 and March 17, 2019, subject to the reporting person's Continuous Service (as defined in the Trevena, Inc. 2013 Equity Incentive Plan, as amended) as of each such vesting 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.

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