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Capnia, Inc. Form 4											
January 13, 2015											
FORM 4									PPROVAL		
	UNITED	STATES		RITIES A			COMMISSIO	N OMB Number:	3235-02	287	
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction					RITIES e Securit ding Con	ies Exchan npany Act	Estimated burden hou response	Estimated average burden hours per response 0.5			
1(b). (Print or Type Respon	ises)										
(Thit of Type Respon	1303)										
1. Name and Address of Reporting Person <u>*</u> ALEXANDER W JAMES			2. Issuer Name and Ticker or Trading Symbol			Trading	5. Relationship of Reporting Person(s) to Issuer				
			•	, Inc. [CA	-		(Check all applicable)				
(Last) (1 3 TWIN DOLPH 160	, , , , , , , , , , , , , , , , , , ,	Middle)	(Month/I	Date of Earliest Transactiononth/Day/Year)_X_ Director/11/2015Officer (gbelow)Officer (g				$\begin{array}{c} \underline{X} 10\% \text{ Owner} \\ \underline{y} \text{ Other (specify below)} \end{array}$			
			4. If Amendment, Date Original Filed(Month/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting					
							Person				
(City) (S	State)	(Zip)	Tab	le I - Non-I	Derivative	Securities A	cquired, Disposed	of, or Beneficia	lly Owned		
	nsaction Date h/Day/Year)	2A. Deeme Execution any (Month/Da	Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3, 4	(A) or of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Reminder: Report on	a separate line	for each cla	ass of sec	urities benef	icially own	ned directly (or indirectly				
Reminder. Report off	a separate nife				Perso inform requir	ns who rest nation cont ed to respo ys a curren	spond to the colle ained in this forn ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)		

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof Derivative	Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr.	([d d of , 4,				
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amoun or Numbe of Shares
Employee Stock Option	\$ 1.8	01/11/2015		А		5,000		01/11/2016(1)	01/11/2025	Common Stock	5,000

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
ALEXANDER W JAMES 3 TWIN DOLPHIN DRIVE, SUITE 160 REDWOOD CITY, CA 94065	Х	Х					
Signatures							
/s/ David O'Toole, Attorney-in-Fact	01/13/2015	i					
**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).
- Beginning on January 11, 2016, twenty-five percent (25%) of the shares subject to the Option shall vest immediately and additional (1) twenty-five percent (25%) of the total shares subject to the Option shall vest annually thereafter on the same day of the month as the date
- of grant, subject to Optione's continuing to be a Service Provider on such dates.

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.