## Edgar Filing: Imprimis Pharmaceuticals, Inc. - Form 4

Imprimis Pharmaceuticals, Inc. Form 4 September 08, 2014

September 08	, 2014											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB APPROVAL			
UNITED STATES SECURI							NGE (	COMMISSION	OMB Number:	3235-0287		
Check this box				Washington, D.C. 20549					Expires:	January 31,		
if no longe subject to Section 16 Form 4 or		STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								2005 average Irs per 0.5		
Form 5 obligation may contin <i>See</i> Instruct 1(b).	Filed pu s Section 17	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										
(Print or Type R	esponses)											
Kammer Robert J Symbol			Symbol	er Name <b>and</b> Ticker or Trading nis Pharmaceuticals, Inc.				5. Relationship of Reporting Person(s) to Issuer				
	[IMMY]					(Check all applicable)						
(Last)	(First)	(First) (Middle) 3. Date of 1 (Month/Da			insaction			_X_ Director _X_ 10% Owner Officer (give title Other (specify below) below)				
C/O IMPRIM PHARMACH INC., 12264 SUITE 350		REAL,	09/04/20	014								
	(Street)	(Street) 4. If Amen Filed(Mont						<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ul>				
SAN DIEGO	), CA 92130								More than One Re			
(City)	(State)	(Zip)	Table	I - Non-De	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficial	lly Owned		
1. Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if any (Month/Day/Year)		3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A)				Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
~				Code V	Amount	or (D)	Price	(Instr. 3 and 4)				
Common Stock	09/04/2014			A <u>(1)</u>	6,623	А	<u>(2)</u>	944,979	D			
Reminder: Repo	rt on a separate lir	ne for each cl	ass of secur	ities benefic	cially own	ed dire	ectly or	indirectly.				

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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. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>		Relationships						
		Director	10% Owner	Officer	Other			
Kammer Robert J C/O IMPRIMIS PHARMACEUTICALS, INC. 12264 EL CAMINO REAL, SUITE 350 SAN DIEGO, CA 92130		Х	Х					
Signatures								
/s/ Robert 09 Kammer 09	9/08/2014							

<u>\*\*</u>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).

Award of Restricted Stock Units vests quarterly in equal installments over a one year period following the date of grant. The shares(1) underlying such Restricted Stock Units will not be delivered to the Reporting Person and may not be transferred or sold until the termination of service.

(2) The Restricted Stock Units were received as a compensatory award for no consideration.

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.