Edgar Filing: Sorrento Therapeutics, Inc. - Form 4

	erapeutics, Inc.								
Form 4 October 31,	2013								
								OMB A	PPROVAL
FORM	/1 4 UNITED	STATES		ECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549					3235-0287
Check t		Washington, D.C. 2034)					Number: Expires:	January 31,	
if no lor subject Section Form 4	F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES					Estimated burden ho response.	urs per		
Form 5 obligati may con <i>See</i> Inst 1(b).	ons ntinue. Section 17((a) of the P	ublic U	Itility Hol	ding Co		ange Act of 1934, t of 1935 or Secti 1940		
(Print or Type	Responses)								
1. Name and Ji Henry	Address of Reporting		Symbol	er Name and to Therape		Trading	5. Relationship o Issuer		
(Last)	(First) (of Earliest T		L	(Che	eck all applicabl	le)
C/O SORRENTO THERAPEUTICS, INC., 6042 CORNERSTONE CT. WEST, SUITE B			(Month/Day/Year)			X Director 10% Owner X Officer (give title Other (specify below) below) President and CEO			
(Street)			4. If Amendment, Date Original 6.			6. Individual or	6. Individual or Joint/Group Filing(Check		
SAN DIEC	GO, CA 92121		Filed(Mo	onth/Day/Yea	r)		Applicable Line) _X_ Form filed by Form filed by Person	One Reporting F More than One R	
(City)	(State)	(Zip)	Tab	ole I - Non-l	Derivative	Securities .	Acquired, Disposed	of, or Beneficia	ally Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	3. Transactio Code (Instr. 8)	4. Securit nAcquired Disposed (Instr. 3,	(A) or of (D)	5. Amount of 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	(D) Price	(Instr. 3 and 4)		
Reminder: Re	port on a separate line	e for each cla	uss of sec	urities bene	ficially ow	ned directly	or indirectly.		
					Perso inforr requi	ons who re nation con red to resp ays a curre	espond to the colle ntained in this form bond unless the fo ently valid OMB co	n are not rm	SEC 1474 (9-02)
	Tab					sposed of, or convertible	r Beneficially Owned securities)	1	
1 Title of) 3 Tron	anction Data	24 Da	mad	4	5 Numbe	ar of 6 Date Ever	cisable and	7 Title and An

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	iorDerivative	Expiration Date	Underlying Securities

Edgar Filing: Sorrento Therapeutics, Inc. - Form 4

Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	Securities Acquired (A) Disposed of (I (Instr. 3, 4, an 5)	or D)	(Month/Day/Year)		(Instr. 3 and 4)	
				Code V	7 (A) (A	D) Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Options	\$ 8.4	10/29/2013		А	101,000	<u>(1)</u>	10/29/2023	Common Stock	101,000	

Reporting Owners

Reporting Owner Name / Address				
I G G G G G G G G G G G G G G G G G G G	Director	10% Owner	Officer	Other
Ji Henry C/O SORRENTO THERAPEUTICS, INC. 6042 CORNERSTONE CT. WEST, SUITE B SAN DIEGO, CA 92121	Х		President and CEO	
Signatures				

/s/ Henry Ji 10/31/2013

<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).
- 1/4 of the original number of shares subject to the option shall vest on October 1, 2014 and 1/48 of the original number of shares subject
- (1) to the option shall vest following each one month period of service thereafter, subject to the reporting person's continued service to the Company through 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.