#### Edgar Filing: Insys Therapeutics, Inc. - Form 4

Insys Thera Form 4	peutics, Inc.									
February 23	3, 2017									
FORM 4 UNITED STATES SECURITIES AND EXCHANGE						IANGE	COMMISSION		APPROVAL	
Charle 4	h:- h		Washington, D.C. 20549				Number:	3235-0287		
Check t if no lor subject	to STAT	EMENT OF	NT OF CHANGES IN BENEFICIAL ( SECURITIES				WNERSHIP OF	Expires: Estimated	0	
Form 4 or Form 5 obligations may continue Filed pursuant to Section 16(a) of the Securities 1 Section 17(a) of the Public Utility Holding Compar					any Act	y Act of 1935 or Section				
<i>See</i> Inst 1(b).		30(h) o	of the In	vestment (	Company	Act of 1	940			
(Print or Type	Responses)									
1. Name and Address of Reporting Person <u>*</u> Del Fosse Franc			2. Issuer Name <b>and</b> Ticker or Trading Symbol			-	5. Relationship of Reporting Person(s) to Issuer			
<i>(</i> <b>7</b> )			•	herapeutic	_	SYJ	(Che	ck all applicab	le)	
(Last)	(First)			f Earliest Tra Day/Year)	insaction		Director	10	% Owner	
	S THERAPEU' SOUTH SPEC	TICS, (	02/21/2				XOfficer (giv below)		her (specify	
DL ( D, " 1	(Street)	2	4 If Δme	ndment, Dat	e Original		6. Individual or J	oint/Group Fil	ng(Check	
	(Succi)			nth/Day/Year)	e originar		Applicable Line) _X_ Form filed by	One Reporting F	Person	
CHANDL	ER, AZ 85286						Person	More than One F	leporting	
(City)	(State)	(Zip)	Tabl	e I - Non-De	erivative Se	curities A	cquired, Disposed o	of, or Beneficia	ally Owned	
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	ur) Execution D any	Date, if	Transaction	Disposed of Instr. 3, 4 a	(D) nd 5) A)	Securities Elementicially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Reminder: Re	eport on a separate	line for each clas	ss of secu	rities benefic	cially owned	l directly c	or indirectly.			
					Persons informa required	who res ion cont to respo a currer	pond to the collec ained in this form and unless the for ntly valid OMB cou	are not m	SEC 1474 (9-02)	
	ſ			urities Acqu , warrants,			Beneficially Owned securities)			
1. Title of Derivative		Transaction Date Ionth/Day/Year)			4. Transacti	5. NumbonDerivativ			7. Title and Amount of Underlying Securities	

Underlying Securities

#### Edgar Filing: Insys Therapeutics, Inc. - Form 4

Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	Securities Acquired (A or Disposed (D) (Instr. 3, 4, and 5)	)	(Month/Day/Year)		(Instr. 3 and 4)	
				Code V	(A) (	D) Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Employee Stock Option (right to buy)	\$ 12.65	02/21/2017		A	56,000	<u>(1)</u>	02/20/2027	Common Stock	56,000	
Restricted Stock Units	(2)	02/21/2017		А	14,000	<u>(3)</u>	(3)	Common Stock	14,000	

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships					
reporting o whet i whet i that cos	Director	10% Owner	Officer	Other		
Del Fosse Franc						
C/O INSYS THERAPEUTICS, INC.			General			
1333 SOUTH SPECTRUM BLVD, # 100			Counsel			
CHANDLER, AZ 85286						

### Signatures

\*\*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) The option vests in 48 equal monthly installments and will be fully vested and exercisable on February 21, 2021.
- (2) Each restricted stock unit represents a contingent right to receive one share of the Issuer's common stock.

Represents shares issuable upon the vesting of restricted stock units ("RSUs") awarded to the Reporting Person on February 21, 2017.(3) The RSUs vest in 3 equal annual installments beginning on February 21, 2018 and will be fully vested on February 21, 2020, in all cases

so long as there has been no break in the Reporting Person's continuous service through such 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.