Edgar Filing: Amphastar Pharmaceuticals, Inc. - Form 4

Amphastar Pharmaceuticals, Inc. Form 4 September 30, 2015

September 3	0, 2015										
FORM 4 LINITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL			
	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287		
Check thi if no long subject to Section 1 Form 4 o	s box STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								Expires: Estimated a burden hour response	•	
Form 5 obligations may continue. See Instruction 1(b). Form 5 obligations may continue. 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											
(Print or Type F	Responses)										
Shandell Jason B. Symbol			Symbol				5. Relationship of Reporting Person(s) to Issuer				
Ampha [AMP]				astar Pharmaceuticals, Inc. H]				(Check all applicable)			
(Month/D			of Earliest Transaction Day/Year)			X Director 10% Owner X Officer (give title Other (specify below) below)					
	ASTAR ŒUTICALS,) 6TH STREET	Г	09/28/20	015				/	President		
					endment, Date Original onth/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
RANCHO CUCAMON	IGA, CA 9173	0						Form filed by M Person	lore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction E (Month/Day/Yea	ar) Executio any	med on Date, if Day/Year)	3. Transactic Code (Instr. 8)	4. Securi on(A) or D (Instr. 3,	ispose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock	09/28/2015			Code V F	Amount 770 <u>(1)</u>	, í	Price \$ 10.97	(Instr. 3 and 4) 160,017	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly 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. oriNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,	3	Date	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	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address		Relationships					
	Director	10% Owner	Officer	Other			
Shandell Jason B. C/O AMPHASTAR PHARMACEUTICALS, IN 11570 6TH STREET RANCHO CUCAMONGA, CA 91730	C. X		President				
Signatures							
/s/ Ken Stupak, by power of 09/30 attorney	/2015						

Date

**Signature of Reporting Person

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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 reported shares were withheld to satisfy the reporting person's tax liability in connection with the vesting of deferred stock units, or DSUs.

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.