Edgar Filing: Hudson Frederick M. - Form 4

| Hudson Frede Form 4 | erick M. | | | | | | | | | | | |
|--|--|---|---|--|---|--|---|--|--|--|--|--|
| February 07, 2 | 2013 | | | | | | | | | | | |
| FORM | Δ | | | | | | | | PPROVAL | | | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | | OMB Number: | 3235-0287 | | | |
| Check this if no longe subject to Section 16 Form 4 or Form 5 | er STATEN | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES | | | | | | | Expires:January 3: 200Estimated average burden hours per response0. | | | |
| Form 5 obligations may continue. See Instruction 1(b). 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 | | | | | | | | on | | | | |
| (Print or Type R | esponses) | | | | | | | | | | | |
| 1. Name and Address of Reporting Person <u>*</u> Hudson Frederick M. | | | 2. Issuer Name and Ticker or Trading Symbol | | | 5. Relationship of Reporting Person(s) to Issuer | | | | | | |
| | SUPERNUS PHARMACEUTICALS INC [SUPN] 3. Date of Earliest Transaction (Month/Day/Year) 02/05/2013 | | | | (Check all applicable) | | | | | | | |
| (Last) (First) (Middle) C/O SUPERNUS PHARMACEUTICALS, INC., 1550 EAST GUDE DRIVE | | | | | Officer (give titleOther (specify below) below) | | | | | | | |
| | | | | endment, Date Original onth/Day/Year) | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | | | |
| ROCKVILL | E, MD 20850 | | | | | | | More than One Re | | | | |
| (City) | (State) | (Zip) | Table | e I - Non-De | erivative S | ecurities Ac | quired, Disposed o | of, or Beneficially Owned | | | | |
| 1.Title of Security (Instr. 3) | 2. Transaction Dat (Month/Day/Year) |) Execution any | | 3. Transactio Code (Instr. 8) | | (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) | | | |
| Common Stock | | | | Code V | Amount | or (D) Price | (Instr. 3 and 4) 5,000 | 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. Number prof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | | 8. D S (I |
|---|---|---|---|--|---|--|--------------------|---|--|--------------------|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | |
| Director Stock Option (Right to Buy) | \$ 7.9 | 02/05/2013 | | A | 8,722 | 02/05/2014 | 02/05/2023 | Common Stock | 8,722 | |

Reporting Owners

| Reporting Owner Name / Address | | Relationships | | | | | |
|---|------------|---------------|---------|-------|--|--|--|
| | Director | 10% Owner | Officer | Other | | | |
| Hudson Frederick M. C/O SUPERNUS PHARMACEUTICALS, INC 1550 EAST GUDE DRIVE ROCKVILLE, MD 20850 | C. X | | | | | | |
| Signatures | | | | | | | |
| /s/ Gregory S. Patrick, as attorney-in-fact | 02/07/2013 | | | | | | |
| <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).

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.