## Edgar Filing: Flexion Therapeutics Inc - Form 4

	erapeutics Inc										
Form 4											
June 13, 20	16										
FORM			GEOU	DITIEC		CHANCI		Т	PPROVAL		
Washington, D.C. 20549							NOMB Number:	3235-0287			
Check t if no loi						Expires:	January 31,				
subject	F CHANGES IN BENEFICIAL OWNERSHIP OF					Estimated a	2005 average				
Section 16. SECURITIES						burden hou	•				
Form 5		rsuant to S	Section	16(a) of tl	ne Securi	ties Excha	inge Act of 1934,	response	0.5		
obligati	ons Section 17						t of 1935 or Section	on			
may con <i>See</i> Inst 1(b).	ittilue.			-	-	ny Act of 1					
(Print or Type	Responses)										
1. Name and	Address of Reporting	Person <sup>*</sup>	2. Issue	er Name <b>an</b>	<b>d</b> Ticker or	Trading	5. Relationship of	of Reporting Per	son(s) to		
Canute Sco			2. Issuer Name <b>and</b> Ticker or Trading Symbol			Issuer					
			Flexion Therapeutics Inc [FLXN]				(Check all applicable)				
(Last) (First) (Middle)			3. Date of Earliest Transaction			(Check an appreade)					
			(Month/Day/Year)			X_ Director 10% Owner Officer (give title Other (specify					
	ION THERAPEU IALL ROAD, SU		06/10/2	2016			below)	below)	er (specify		
(Street)			4. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check Applicable Line)					
			Filed(Month/Day/Year)								
BURLING	TON, MA 01803						_X_ Form filed by Form filed by Person	More than One Re			
(City)	(State)	(Zip)	Tat	ole I - Non-	Derivative	Securities A	Acquired, Disposed	of, or Beneficial	lly Owned		
1.Title of	2. Transaction Date	2A. Deem	ed	3.	4. Securit	ies	5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year)	Day/Year) Execution Date					Securities	Form: Direct	Indirect		
(Instr. 3)		any (Month/D	CodeDisposed of (D)ay/Year)(Instr. 8)(Instr. 3, 4 and 5)				Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership		
		(month/D	uy, reur)	(11301.0)	(1150.5,	r und 5)	Following	(Instr. 4)	(Instr. 4)		
						(A)	Reported				
						or	Transaction(s) (Instr. 3 and 4)				
				Code V	Amount	(D) Price	(insu: 5 and 1)				
Reminder: Re	port on a separate line	e for each cl	ass of sec	urities bene	ficially ow	ned directly	or indirectly.				
							spond to the colle		SEC 1474		
							tained in this form ond unless the fo		(9-02)		
						ays a curre	ntly valid OMB co				

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of	8
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities	D
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	S

(Instr. 3)	Price of Derivative Security	(Month/Day/Year	) (Instr. 8)	or Dispose (D)	(Instr. 3, 4,				(
			Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (Right to Buy)	\$ 13.83	06/10/2016	A	12,500		<u>(1)</u>	06/09/2026	Common Stock	12,500

## **Reporting Owners**

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Canute Scott A C/O FLEXION THERAPEUTICS, INC. 10 MALL ROAD, SUITE 301 BURLINGTON, MA 01803	X						
Signatures							
/s/ Frederick Driscoll, Attorney-in-Fact	06/13/2016						
<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) The stock option vests and becomes exercisable in 12 equal monthly installments following the date of grant.

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.

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