#### Edgar Filing: Evoke Pharma Inc - Form 4

| Evoke Pharn<br>Form 4<br>May 27, 201                                           |                                       |                             |                                                                                     |             |                                    |                                                          |                         |                        |                                     |  |
|--------------------------------------------------------------------------------|---------------------------------------|-----------------------------|-------------------------------------------------------------------------------------|-------------|------------------------------------|----------------------------------------------------------|-------------------------|------------------------|-------------------------------------|--|
|                                                                                | IЛ                                    |                             |                                                                                     |             |                                    |                                                          |                         |                        | PPROVAL                             |  |
| FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 |                                       |                             |                                                                                     |             |                                    | OMB<br>Number:                                           | 3235-0287               |                        |                                     |  |
| Check the                                                                      |                                       |                             |                                                                                     |             |                                    |                                                          |                         | Expires:               | January 31,                         |  |
| if no longer<br>subject to STATEMENT OF CHANGES IN BENEFIC                     |                                       |                             |                                                                                     |             | CIA                                | LOW                                                      | NERSHIP OF              | Estimated a            | 2005<br>average                     |  |
| 0                                                                              | Section 16. SECURITIES                |                             |                                                                                     |             |                                    |                                                          | irs per                 |                        |                                     |  |
| Form 4 o                                                                       |                                       |                             |                                                                                     |             |                                    |                                                          | response                | •                      |                                     |  |
| Form 5<br>obligation                                                           | • · · · ·                             | suant to Section 1          |                                                                                     |             |                                    |                                                          |                         |                        |                                     |  |
| may cont                                                                       |                                       | a) of the Public U          | •                                                                                   | •           |                                    |                                                          |                         | n                      |                                     |  |
| See Instru                                                                     |                                       | 30(h) of the Ir             | vestment                                                                            | Compan      | y Act                              | of 19                                                    | 40                      |                        |                                     |  |
| 1(b).                                                                          |                                       |                             |                                                                                     |             |                                    |                                                          |                         |                        |                                     |  |
| (Print or Type F                                                               | Pasponsas)                            |                             |                                                                                     |             |                                    |                                                          |                         |                        |                                     |  |
| (I fint of Type I                                                              | (esponses)                            |                             |                                                                                     |             |                                    |                                                          |                         |                        |                                     |  |
| 1. Name and A                                                                  | ddress of Reporting I                 | Person <sup>*</sup> 2 Jacua | r Nama and                                                                          | Ticker or ' | Fradin                             | a                                                        | 5. Relationship of      | f Reporting Per        | son(s) to                           |  |
| DP VII ASS                                                                     | uer Name <b>and</b> Ticker or Trading |                             |                                                                                     |             | Issuer                             |                                                          | 1 0 ()                  |                        |                                     |  |
|                                                                                | Symbol<br>Evoke                       | woke Pharma Inc [EVOK]      |                                                                                     |             |                                    |                                                          |                         |                        |                                     |  |
|                                                                                |                                       |                             |                                                                                     |             |                                    |                                                          | (Check all applicable)  |                        |                                     |  |
|                                                                                |                                       |                             | B. Date of Earliest Transaction                                                     |             |                                    | Director                                                 | <b>Y</b> 100            | % Owner                |                                     |  |
|                                                                                |                                       |                             | Month/Day/Year)<br>)5/26/2016                                                       |             |                                    | DirectorX10% Owner<br>Officer (give title Other (specify |                         |                        |                                     |  |
| LLC, ONE                                                                       | below)                                |                             |                                                                                     |             | below)                             | below)                                                   |                         |                        |                                     |  |
| (Street) 4. If Am                                                              |                                       |                             | Amendment Date Original                                                             |             |                                    | 6. Individual or Joint/Group Filing(Check                |                         |                        |                                     |  |
|                                                                                |                                       |                             | I. If Amendment, Date Original                                                      |             |                                    |                                                          | Applicable Line)        |                        |                                     |  |
| • • •                                                                          |                                       |                             |                                                                                     |             | Form filed by One Reporting Person |                                                          |                         |                        |                                     |  |
| PRINCETON NI 08542 _X_Form filed by M                                          |                                       |                             |                                                                                     |             |                                    | More than One R                                          | lore than One Reporting |                        |                                     |  |
|                                                                                |                                       |                             |                                                                                     |             |                                    |                                                          | Person                  |                        |                                     |  |
| (City)                                                                         | (State) (                             | (Zip) Tab                   | le I - Non-D                                                                        | erivative S | Securi                             | ties Ac                                                  | quired, Disposed o      | f, or Beneficial       | lly Owned                           |  |
| 1.Title of                                                                     | 2. Transaction Date                   | e 2A. Deemed                | 3.                                                                                  | 4. Securi   | ties                               |                                                          | 5. Amount of            | 6. Ownership           | 7. Nature of                        |  |
| Security                                                                       | (Month/Day/Year)                      | Execution Date, if          | TransactionAcquired (A) or<br>Code Disposed of (D)<br>(Instr. 8) (Instr. 3. 4 and 5 |             |                                    |                                                          | Securities              | Form: Direct           | Indirect<br>Beneficial<br>Ownership |  |
| (Instr. 3)                                                                     |                                       | any<br>(Month/Day/Vear)     |                                                                                     |             |                                    |                                                          | Beneficially<br>Owned   | (D) or<br>Indirect (I) |                                     |  |
| (wonth/Day/                                                                    |                                       |                             | ay/Year) (Instr. 8) (Instr. 3, 4 and 5)                                             |             |                                    | Following                                                | (Instr. 4)              | (Instr. 4)             |                                     |  |
|                                                                                |                                       |                             |                                                                                     |             | (A)                                |                                                          | Reported                | . ,                    |                                     |  |
|                                                                                |                                       |                             |                                                                                     |             | or                                 |                                                          | Transaction(s)          |                        |                                     |  |
|                                                                                |                                       |                             | Code V                                                                              | Amount      |                                    | Price                                                    | (Instr. 3 and 4)        |                        |                                     |  |
| Common                                                                         | 05/26/2016                            |                             | S                                                                                   | 5,880       | D                                  | \$                                                       | 10,328                  | D <sup>(1)(2)(3)</sup> |                                     |  |
| Stock                                                                          | 0012012010                            |                             | 5                                                                                   | 5,000       | D                                  | 4.7                                                      | 10,520                  |                        |                                     |  |
|                                                                                |                                       |                             |                                                                                     |             |                                    |                                                          |                         |                        |                                     |  |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

### Edgar Filing: Evoke Pharma Inc - Form 4

| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transactio<br>Code<br>(Instr. 8) | 5.<br>ofNumber<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3,<br>4, and 5) |                     | ate                | 7. Titl<br>Amou<br>Under<br>Securi<br>(Instr. | int of<br>rlying                       | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secu<br>Bene<br>Owna<br>Follo<br>Repo<br>Trans<br>(Instr |
|-----------------------------------------------------|-----------------------------------------------------------------------|-----------------------------------------|-------------------------------------------------------------|----------------------------------------|-------------------------------------------------------------------------------------------------------------------------|---------------------|--------------------|-----------------------------------------------|----------------------------------------|-----------------------------------------------------|----------------------------------------------------------------------------|
|                                                     |                                                                       |                                         |                                                             | Code V                                 | (A) (D)                                                                                                                 | Date<br>Exercisable | Expiration<br>Date | Title                                         | Amount<br>or<br>Number<br>of<br>Shares |                                                     |                                                                            |

# **Reporting Owners**

| Reporting Owner Name / Address                                                                 | Relationships |           |         |       |  |  |  |
|------------------------------------------------------------------------------------------------|---------------|-----------|---------|-------|--|--|--|
| Reporting of the Funite ( Funite is                                                            | Director      | 10% Owner | Officer | Other |  |  |  |
| DP VII ASSOCIATES LP<br>C/O DOMAIN ASSOCIATES, LLC<br>ONE PALMER SQUARE<br>PRINCETON, NJ 08542 |               | Х         |         |       |  |  |  |
| BLAIR JAMES C<br>C/O DOMAIN ASSOCIATES, LLC<br>ONE PALMER SQUARE<br>PRINCETON, NJ 08542        |               | Х         |         |       |  |  |  |
| DOVEY BRIAN H<br>C/O DOMAIN ASSOCIATES, LLC<br>ONE PALMER SQUARE<br>PRINCETON, NJ 08542        |               | Х         |         |       |  |  |  |
| TREU JESSE I<br>C/O DOMAIN ASSOCIATES, LLC<br>ONE PALMER SQUARE<br>PRINCETON, NJ 08542         |               | Х         |         |       |  |  |  |
| VITULLO NICOLE<br>C/O DOMAIN ASSOCIATES, LLC<br>ONE PALMER SQUARE<br>PRINCETON, NJ 08542       |               | Х         |         |       |  |  |  |
| Halak Brian K<br>C/O DOMAIN ASSOCIATES, LLC<br>ONE PALMER SQUARE<br>PRINCETON, NJ 08542        |               | Х         |         |       |  |  |  |

## Signatures

/s/ Lisa A. Kraeutler, as Attorney-in-Fact for DP VII Associates, L.P., James C. Blair, Brian H. Dovey, Jesse I. Treu, Nicole Vitullo & Brian K. Halak

\*\*Signature of Reporting Person

## **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).

The securities reported as directly beneficially owned by the Reporting Person may be deemed to be indirectly beneficially owned by each of the Reporting Owners listed below, each of whom is a managing member of One Palmer Square Associates VII, LLC ("OPSA

(1) VII"), the sole general partner of the Reporting Person. Pursuant to Instruction 4(b)(iv) of Form 4, each such individual has elected to report as indirectly beneficially owned the entire number of securities owned by the Reporting Person, however each of them disclaims beneficial ownership of any securities, and any proceeds thereof, that exceed his or her pecuniary interest therein and/or that are not actually distributed to him or her.

As managing members of OPSA VII, which is also the sole general partner of Domain Partners VII, L.P. each Reporting Owner listed below may also be deemed to indirectly beneficially own 606,283 shares of Common Stock held by Domain Partners VII, L.P. Pursuant

(2) to Instruction 4(b)(iv) of Form 4, each such individual has elected to report as indirectly beneficially owned the entire number of securities owned by Domain Partners VII, L.P., however each of them disclaims beneficial ownership of any securities, and any proceeds thereof, that exceed his or her pecuniary interest therein and/or that are not actually distributed to him or her.

As managing members of Domain Associates, LLC, each Reporting Owner listed below may also be deemed to indirectly beneficially own 5,250 shares of Common Stock held by Domain Associates, LLC. Pursuant to Instruction 4(b)(iv) of Form 4, each such individual

(3) has elected to report as indirectly beneficially owned the entire number of securities owned by Domain Associates, LLC, however each of them disclaims beneficial ownership of any securities, and any proceeds thereof, that exceed his or her pecuniary interest therein and/or that are not actually distributed to him or her.

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.

Date