Edgar Filing: Neos Therapeutics, Inc. - Form 4

Neos Therap	eutics, Inc.											
Form 4												
October 18, 2	2016											
FORM	ΙΔ									-	PPROVAL	
	UNITE	D STATE				ND EX(D.C. 20:		NGE (COMMISSION	OMB Number:	3235-0287	
Check thi										Expires:	January 31,	
subject to STATEMENT OF CHAN				GES IN BENEFICIAL OWNERS					NERSHIP OF	Estimated a	2005 average	
Section 1				SECU	SECURITIES					burden hours per		
Form 4 or									response			
Form 5 obligation	• •							-	ge Act of 1934,			
may cont	Section 1			•		•	· ·		f 1935 or Sectio	n		
<i>See</i> Instru 1(b).	iction	30(h) of the In	vestme	ent C	Compan	y Aci	t of 194	40			
(Print or Type F	Responses)											
Garg Vipin K Symbol				. Issuer Name and Ticker or Trading mbol					5. Relationship of Reporting Person(s) to Issuer			
				eos Therapeutics, Inc. [NEOS]					(Chec	k all applicable	e)	
(Last)	(First)	(Middle)	3. Date of	Earliest	t Tra	nsaction			(Chief	in un upprouon	•)	
				onth/Day/Year)					_X_ Director10% Owner			
	THERAPEUT N. HIGHWAY	,	10/17/20	016					XOfficer (give below) Chief I	below) Executive Offic	er (specify er	
	(Street)		4. If Ame	ndment.	Dat	e Original			6. Individual or Jo	oint/Group Filin	19(Check	
· · · · · · · · · · · · · · · · · · ·				If Amendment, Date Original ed(Month/Day/Year)					Applicable Line)			
GRAND PR	AIRIE, TX 75	5050		·					_X_ Form filed by 0 Form filed by N Person	One Reporting Pe More than One Re		
(City)	(State)	(Zip)	Table	e I - Noi	n-De	erivative S	Securi	ties Aco	quired, Disposed of	f, or Beneficial	lly Owned	
1.Title of	2. Transaction I	Date 2A. De	emed	3.		4. Securi	ties A	cquired	5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Ye		Execution Date, if			n(A) or Di	ispose	d of	Securities	Form: Direct		
(Instr. 3)		any (Month	/Day/Year)	Code (D) (Instr. 8) (Instr. 3, 4 and 5)				5)	Beneficially Owned		Beneficial Ownership	
		((- /	,, ,		,	Following	(Instr. 4)	(Instr. 4)	
							(A)		Reported			
							or		Transaction(s) (Instr. 3 and 4)			
C				Code	V	Amount	(D)	Price	(
Common Stock	10/17/2016			F(1)		9,709	D	\$ 6.37	125,643	D		

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)

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. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Amou Unde Secur	le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code V		Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Garg Vipin K C/O NEOS THERAPEUTICS, INC. 2940 N. HIGHWAY 360 GRAND PRAIRIE, TX 75050	Х		Chief Executive Officer					
Signatures								
/s/ Benjamin Piper, attorney-in-fact	10/18/2	.016						
**Signature of Reporting Person	Date	e						

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) Vesting transaction: Shares surrendered to the Issuer solely to cover taxes associated with vesting of restricted stock.

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.