## Edgar Filing: COX CARRIE SMITH - Form 4

COX CARRIE SMITH

| Form 4   | 05 2018                                 |               |          |  |                  |  |               |  |   |   |  |  |
|--|---|---------------|----------|--|------------------|--|---------------|--|---|---|--|--|
| November 05, 2018<br>FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION |   |               |          |  |                  |  | OMB APPROVAL  |  |   |   |  |  |
|  | Washington, D.C. 20549                  |               |          |  |                  |  | 0111111551011 | OMB<br>Number:   | 3235-0287   |   |  |  |
| Check this box<br>if no longer<br>subject to<br>Section 16.<br>Form 4 or     |   |               |          | NGES IN BENEFICIAL OWNERSHIP O<br>SECURITIES     |                  |  |               |  | Expires:January 31,Expires:2005Estimated averageburden hours perresponse0.5                             |   |  |  |
| Form 5<br>obligatio<br>may con<br><i>See</i> Instr<br>1(b).                  | tinue. Section 170                      | (a) of the l  | Public U | tility Hol                                       | ding Co          | mpan   | U             | Act of 1934,<br>1935 or Section<br>)   | l   |   |  |  |
| (Print or Type )   | Responses)                              |               |          |  |                  |  |               |  |   |   |  |  |
| COX CARRIE SMITH Symbol  |   |               | pol      |  |                  | 5. Relationship of Reporting Person(s) to Issuer |               |  |   |   |  |  |
| ARRA<br>[ARRY  |   |               |          | AY BIOPHARMA INC<br>Y]                           |                  |  |               | (Check all applicable)   |   |   |  |  |
| (Last)<br>C/O ARRA<br>WALNUT   | Y BIOPHARMA                             | Middle)       |          | of Earliest T<br>Day/Year)<br>2018               | ransaction       |  |               | Director<br>Officer (give t<br>below)  |   | Owner<br>er (specify  |  |  |
|  |   |               |          |  | onth/Day/Year) A |  |               |  | 6. Individual or Joint/Group Filing(Check<br>Applicable Line)<br>_X_ Form filed by One Reporting Person |   |  |  |
| BOULDER  | , CO 80301                              |               |          |  |                  |  |               | Form filed by M<br>Person  |   |   |  |  |
| (City)   | (State)                                 | (Zip)         | Tab      | le I - Non-l                                     | Derivative       | Secu   | rities Acqu   | ired, Disposed of,   | or Beneficial   | ly Owned  |  |  |
| 1.Title of<br>Security<br>(Instr. 3)   | 2. Transaction Date<br>(Month/Day/Year) | Execution any | Date, if | 3.<br>Transactio<br>Code<br>(Instr. 8)<br>Code V |                  | sed of   |               | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 3 and 4) | 6.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I)<br>(Instr. 4)                              | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |  |
| Common<br>Stock  | 11/01/2018                              |               |          | Р  | 3,000            | A  | \$<br>16.8651 | 3,000  | 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)

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| 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>Transactic<br>Code<br>(Instr. 8) | 5.<br>onNumber<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>Secur<br>(Instr. | int of<br>lying                        | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secu<br>Bene<br>Owne<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 |           |         |  |  |
|---|---------------|-----------|---------|--|--|
|   | Director      | 10% Owner | Officer |  |  |
| COX CARRIE SMITH<br>C/O ARRAY BIOPHARMA, 3200 WALNUT ST.<br>BOULDER, CO 80301 |               |           |         |  |  |
| Signatures  |               |           |         |  |  |
| Jason Haddock, attorney-in-fact for Carrie<br>S. Cox                          | 11/05/2018    |           |         |  |  |
| <u>**</u> Signature of Reporting Person                                       | Dat           | 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).

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.

Other