Karyopharm Therapeutics Inc.

Form 4 June 17, 2016

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB

Expires:

Number:

3235-0287 January 31,

0.5

if no longer subject to Section 16. Form 4 or

Check this box

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

2005 Estimated average burden hours per

OMB APPROVAL

Form 5 obligations

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

response...

may continue. 30(h) of the Investment Company Act of 1940 See Instruction

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * WEG KENNETH E

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to Issuer

Symbol

Karyopharm Therapeutics Inc.

(Check all applicable)

[KPTI]

(Last)

3. Date of Earliest Transaction

X_ Director 10% Owner Officer (give title Other (specify

(Month/Day/Year)

06/16/2016

C/O KARYOPHARM

THERAPEUTICS INC., 85 WELLS **AVENUE**

(First)

(Street)

4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check

Filed(Month/Day/Year) Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting

NEWTON, MA 02459

(City) (State) (Zip)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1.Title of Security (Instr. 3)

2. Transaction Date 2A. Deemed (Month/Day/Year)

(Middle)

Execution Date, if

(Month/Day/Year)

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5)

5. Amount of Securities Beneficially Owned

Following

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial Ownership (Instr. 4) (Instr. 4)

(A)

Reported Transaction(s)

Code V Amount (D) Price

(Instr. 3 and 4)

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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 | 2. | 3. Transaction Date | 3A. Deemed | 4. | | 5. Number | of | 6. Date Exer | cisable and | 7. Title and A | Amount |
|------------|--|------------------------------------|---------------------|--------------------|------------|-----|--|-----|----------------------------------|--------------------|------------------|----------------------------------|
| | Derivative | Conversion | (Month/Day/Year) | Execution Date, if | Transac | tio | ionDerivative | | Expiration Date (Month/Day/Year) | | Underlying S | Securitie |
| | Security | or Exercise | | any | Code | | Securities | | | | (Instr. 3 and 4) | |
| (Instr. 3) | | Price of Derivative Security | | (Month/Day/Year) | (Instr. 8) | | Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | | | | |
| | | | | | Code | V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amour or Number of Shar |
| | Nonstatutory Stock Option (right to buy) | \$ 8.06 | 06/16/2016 | | A | | 10,000 | | <u>(1)</u> | 06/15/2026 | Common Stock | 10,00 |

Reporting Owners

Reporting Owner Name / Address

Director 10% Owner Officer Other

WEG KENNETH E C/O KARYOPHARM THERAPEUTICS INC. 85 WELLS AVENUE NEWTON, MA 02459



Signatures

/s/Christopher B. Primiano, Attorney-in-Fact for Kenneth Weg

06/17/2016

**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) This option vests as to 100% of the underlying shares on June 16, 2017, provided that the holder continues to serve as a director of the issuer through such date.

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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