## Edgar Filing: SYNERGY PHARMACEUTICALS, INC. - Form 4

SYNERGY I Form 4 May 28, 2014	PHARMACEU 4	JTICALS, I	INC.									
FORM		S SECURITIES AND EXCHANGE (					COMMISSION	-	PPROVAL			
Check thi if no long subject to Section 1 Form 4 of Form 5 obligation may conti	Washington, D.C. 20549 F CHANGES IN BENEFICIAL OW SECURITIES Section 16(a) of the Securities Exchang Public Utility Holding Company Act of of the Investment Company Act of 194					<b>NERSHIP OF</b> With the second		January 31 2005 ed average nours per				
See Instru 1(b). (Print or Type R		50(II)	of the fit	vestment	Compan	y Act	. 01 1 )-	TU				
1. Name and Address of Reporting Person <u>*</u> Shailubhai Kunwar			2. Issuer Name and Ticker or Trading Symbol SYNERGY PHARMACEUTICALS, INC. [SGYP]					<ul><li>5. Relationship of Reporting Person(s) to Issuer</li><li>(Check all applicable)</li></ul>				
	(First) RGY EUTICALS IN N AVENUE,		3. Date of (Month/D 05/23/20	-	ansaction			Director X Officer (give below) Chief				
					4. If Amendment, Date Original Filed(Month/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ul>			
NEW YORI	K, NY 10170							Form filed by M Person	More than One Re	eporting		
(City)	(State)	(Zip)	Table	e I - Non-D	erivative	Securi	ties Acq	uired, Disposed o	f, or Beneficial	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction I (Month/Day/Ye	ar) Executio any	med on Date, if Day/Year)	3. Transactic Code (Instr. 8) Code V	(D) (Instr. 3,	ispose	d of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	05/23/2014			Р	3,000	A	\$ 3.89	91,017	D			

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

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 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)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>		Relationships						
		Director	10% Owner	Officer	Other			
Shailubhai Kunwar C/O SYNERGY PHARMACEUTICALS INC., 420 LEXINGTON AVENUE, SUITE 2012 NEW YORK, NY 10170				Chief Scientific Officer				
Signatures								
/s/ Kunwar Shailubhai	05/28/2014							

<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).

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.