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FELDMAN Form 4 April 10, 201											
EODM	OMB AF	OMB APPROVAL									
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287		
Check this box if no longer STATEMENT OF CHANCES IN DENEFLOIAL OWNEDSILLD OF							Expires:	January 31, 2005			
subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF							Estimated average				
	Section 16. SECURITIES						burden hours per				
Form 4 of Form 5	Form 4 or Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,							response	0.5		
obligation	¹⁸ Section $17($					-	1935 or Section	n			
may cont	inue.		•	•	- ·						
<i>See</i> Instruction 30(h) of the Investment Company Act of 1940 1(b).											
(Print or Type F	Responses)										
1. Name and A FELDMAN	Issuer Name and Ticker or Trading nbol				5. Relationship of Reporting Person(s) to Issuer						
Cap			apstone Therapeutics Corp. [CAPS]				(Check all applicable)				
(Last)	(First) (1	Middle) 3.	Date of Earliest T	ransaction			(Chee	k un applicable)		
			(Ionth/Day/Year)			X_ Director 10% Owner Officer (give title Other (specify					
1275 W. WA SUITE 101	/08/2013	8/2013			below) below)						
SUITE IUI		_									
				mendment, Date Original			6. Individual or Joint/Group Filing(Check				
Filed(Month/Day/Year)				r)					One Reporting Person		
TEMPE, AZ	2 85281						Form filed by M Person	Iore than One Re	porting		
(City)	(State)	(Zip)	Table I - Non-I	Derivative S	ecuri	ties Acq	uired, Disposed of	, or Beneficial	y Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)					5. Amount of Securities Beneficially	6. Ownership 7. Form: Direct Inc (D) or Be				
		•	/Year) (Instr. 8)				Owned Following Reported	Indirect (I) (Instr. 4)	Ownership (Instr. 4)		
					(A)		Transaction(s)				
			Code V	Amount	or (D)	Price	(Instr. 3 and 4)				
Common Stock	04/08/2013		Р	25,000	A	\$ 0.21	225,564	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. Transactio 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)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne 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			
FELDMAN FREDRIC J 1275 W. WASHINGTON STREET, SUI TEMPE, AZ 85281	ГЕ 101	Х						
Signatures								
/s/ Les M. Taeger, Attorney in-fact	04/10/2013	3						

**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.