Edgar Filing: Riga Thomas J - Form 4

Riga Thoma Form 4											
June 26, 201	18										
FORM		статес	SECII	DITIES	AND EV	СЦ	NCE CO	MMISSION		PROVAL	
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								JMIMISSION	OMB Number:	3235-0287	
if no lon	aor								Expires:	January 31, 2005	
subject to Section 16. Form 4 or					BENEF	ICIA	AL OWN	EKSHIP OF	Estimated average burden hours per		
Form 5 obligatic may con <i>See</i> Instr 1(b).	Filed pur ons Section 17(a) of the F	Public U	tility Ho	lding Co	mpan	•	Act of 1934, 1935 or Section		0.5	
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> Riga Thomas J							0	5. Relationship of Reporting Person(s) to Issuer			
			PHARM	MACEU	ΓICALS	INC	[SPPI]	(Check all applicable)			
(Last) (First) (Middle) 3. Date of				f Earliest Transaction _				Director 10% Owner			
11500 S. EASTERN AVE., SUITE 240			(v(v))(u)/(Jav/(tcal))					_X_Officer (give titleOther (specify below) below) EVP, COO & CCO			
				Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
HENDERS	ON, NV 89052						ī	Form filed by M Person	ore than One Re	porting	
(City)	(State)	(Zip)	Tab	le I - Non-	Derivative	e Secu	rities Acqu	ired, Disposed of,	or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	any		ed Date, if ay/Year)	Code (Instr. 3, 4 and 5)			(D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)	(
Common Stock, \$0.001 par value	06/25/2018			S <u>(1)</u>	235	D	\$ 18.7557	240,263	D		
Common Stock, \$0.001 par value								7,069	I	By 401(k) plan	

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)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	7. Titl Amou Under Securi (Instr.	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owno Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Riga Thomas J 11500 S. EASTERN AVE., SUITE 240 HENDERSON, NV 89052			EVP, COO & CCO				
Signatures							
/s/ Kurt A. Gustafson, attorney-in-fact for Riga	06/26/2018						
<u>**</u> Signature of Reporting Person			Date				
Evaluation of Deenen							

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 transaction was effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person for the purpose of satisfying tax withholding obligations in connection with restricted stock awards granted by the issuer.

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.