## Edgar Filing: Celano Michael - Form 4

Celano Michael Form 4 January 04, 2019								
	TATES SECUR Was				NGE (	COMMISSION		9PROVAL 3235-0287
Washington, D.C. 20549Number:3233-028Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIESNumber:3233-028TATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIESExpires:January 31 200State average 								
(Print or Type Responses)								
1. Name and Address of Reporting Po Celano Michael	suer Name <b>and</b> Ticker or Trading ol o Pharma, Inc. [REPH]				5. Relationship of Reporting Person(s) to Issuer			
(Last) (First) (Mi C/O RECRO PHARMA, INC. LAPP ROAD	te of Earliest Transaction (th/Day/Year) (2/2019				(Check all applicable) <u></u> Director <u></u> 10% Owner <u></u> Officer (give title <u></u> Other (specify below) Chief Operating Officer			
(Street)	(Street) 4. If Amendment, Date Original Filed(Month/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
MALVERN, PA 19355						Form filed by M Person	Iore than One Re	eporting
(City) (State) (Z	Zip) Tabl	e I - Non-D	erivative S	Securi	ties Acc	quired, Disposed of	f, or Beneficial	lly Owned
(Instr. 3)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr. 8)	on(A) or Di (D) (Instr. 3, Amount	spose	d of 5) Price	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	
Common 01/02/2019 Stock		F	1,702 (1)	D	\$ 7.41	26,773	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 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. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu 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			
Celano Michael C/O RECRO PHARMA, INC. 490 LAPP ROAD MALVERN, PA 19355			Chief Operating Officer				
Signatures							
/s/ Ryan D. Lake, as attorney-in-fact		01/04/2019					
**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) Shares withheld by the Issuer to satisfy applicable withholding taxes upon vesting of restricted stock units.

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.