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COHEN STEVEN A/SAC CAPITAL MGMT LP Form 4 December 19, 2017 OMB APPROVAL FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB 3235-0287 Washington, D.C. 20549 Number: Check this box January 31, Expires: if no longer 2005 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF subject to Estimated average **SECURITIES** Section 16. burden hours per Form 4 or response... 0.5 Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 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 * 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading Point72 Asset Management, L.P. Issuer Symbol BUILD A BEAR WORKSHOP INC (Check all applicable) [BBW] (Last) (First) (Middle) 3. Date of Earliest Transaction Director X 10% Owner Other (specify Officer (give title (Month/Day/Year) below) below) 72 CUMMINGS POINT ROAD 12/15/2017 (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) Form filed by One Reporting Person _X_ Form filed by More than One Reporting STAMFORD, CT 06902 Person (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 2. Transaction Date 2A. Deemed 7. Nature of 1.Title of 3. 4. Securities Acquired (A) 5. Amount of 6. Execution Date, if Security (Month/Day/Year) Transaction Disposed of (D) Securities Ownership Indirect (Instr. 3) Code (Instr. 3, 4 and 5) Beneficially Form: Beneficial any Direct (D) (Month/Day/Year) (Instr. 8) Owned Ownership or Indirect (Instr. 4) Following Reported (I) (A) Transaction(s) (Instr. 4) or (Instr. 3 and 4) Code V Amount (D) Price Common Stock, par See 25,000 \$ 2,749,976 (1) I Ρ 12/15/2017 Footnotes value А (1)(2)9.1377 (2) \$0.01 per (1)(2)share Common See Stock, par 2,774,976 (1) 25.000 I value 12/18/2017 Ρ Footnotes А (1)(2)(2) 9.4161 (1) (2) \$0.01 per share

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 | 3. Transaction Date (Month/Day/Year) | 4. Transac Code (Instr. 8 | | | ate | Amou Unde Secur | | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene |
|---|---|---|------------------------------------|------------------------|---------------------|--------------------|-----------------------|------------------------------|---|--------------------------------|
| | Derivative Security | | | Securities Acquired | | | (Instr | . 3 and 4) | | Owne Follo |
| | | | | (A) or | | | | | | Repo |
| | | | | Disposed of (D) | | | | | | Trans (Instr |
| | | | | (Instr. 3, 4, and 5) | | | | | | |
| | | | | 4, and 3) | | | | Amount | | |
| | | | | | Date Exercisable | Expiration Date | Title | Amount or Number of | | |
| | | | Code V | V (A) (D) | | | | Shares | | |

Reporting Owners

| Reporting Owner Name / Address | | Relationsh | | | | | | | |
|--|----------|------------|---------|-------|--|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | | |
| Point72 Asset Management, L.P. 72 CUMMINGS POINT ROAD STAMFORD, CT 06902 | | Х | | | | | | | |
| Point72 Capital Advisors, Inc. 72 CUMMINGS POINT ROAD STAMFORD, CT 06902 | | Х | | | | | | | |
| COHEN STEVEN A/SAC CAPITAL MGMT LP 72 CUMMINGS POINT ROAD STAMFORD, CT 06902 | | Х | | | | | | | |
| Signatures | | | | | | | | | |
| POINT72 ASSET MANAGEMENT, L.P.; By: Point72 Capital Advisors, Inc., its general partner; By: /s/ Kevin J. O'Connor, Authorized Officer | | | | | | | | | |
| <u>**</u> Signature of Report | Date | | | | | | | | |
| POINT72 CAPITAL ADVISORS, INC.; By: /s/ Kevin J. O'Connor, Authorized Officer | | | | | | | | | |
| <u>**</u> Signature of Reporting Person | | | | | | | | | |
| STEVEN A. COHEN: By: /s/ Kevin J. O'Connor, Authorized Signatory | | | | | | | | | |
| **Signature of Report | 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) See Exhibit 99.1, Note 1.
- (2) See Exhibit 99.1, Note 2.

Remarks:

See Exhibit 99.1

Exhibit List: Exhibit 99.1 - Explanation of Responses

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.