**RIOUX PATRICE** 

Form 4 April 13, 2012

### FORM 4

#### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB** Number:

3235-0287

0.5

January 31, Expires: 2005

**OMB APPROVAL** 

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Form 4 or Form 5 obligations may continue. See Instruction

Check this box

if no longer

subject to

Section 16.

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and A RIOUX PA	Address of Reporting F TRICE	Symbol	r Name and Ticker or Trading	5. Relationship of Reporting Person(s) to Issuer			
		Kaptor	Pharmaceutical Corp [RPTP	(Check all applicable)			
		(Month/D 04/13/20 2., 9		Director 10% Owner Officer (give titleX Other (specify below)			
	(Street)	4. If Ame	endment, Date Original	6. Individual or Joint/Group Filing(Check			
			nth/Day/Year)	Applicable Line)			
NOVATO,	CA 94949			_X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	Zip) Tabl	le I - Non-Derivative Securities A	cquired, Disposed of, or Beneficially Owned			
1.Title of	2. Transaction Date	2A. Deemed	<ol> <li>4. Securities Acquire</li> </ol>	d 5. Amount of 6. Ownership 7. Nature of			
Security	(Month/Day/Year)	Execution Date, if	Transaction(A) or Disposed of (I				
(Instr. 3)		any (Month/Day/Year)	Code (Instr. 3, 4 and 5) (Instr. 8)	Beneficially (D) or Beneficial Owned Indirect (I) Ownership			
		(Month/Day/Tear)	(Ilistr. 6)	Owned Indirect (I) Ownership Following (Instr. 4) (Instr. 4)			
			(A) or Code V Amount (D) Pri	Reported Transaction(s) (Instr. 3 and 4)			
Common Stock	04/13/2012		M 25,497 A \$ 0.8	<sub>5</sub> 25,497 D			

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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)

#### Edgar Filing: RIOUX PATRICE - Form 4

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. Transaction Code (Instr. 8)	5. Number of ionDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Derivative Expiration Date Securities (Month/Day/Year) Acquired (A) or Disposed of (D) (Instr. 3, 4,		7. Title and Amount o Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)		Date Exercisable	Expiration Date	Title	Amount or Number of Share
Stock options (right to buy)	\$ 0.85	04/13/2012		M	25,4	.97	10/16/2009(1)	04/15/2019	Common Stock	25,497

## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
•	Director	10% Owner	Officer	Other		
RIOUX PATRICE						
C/O RAPTOR PHARMACEUTICAL CORP.				CMO, Raptor		
9 COMMERCIAL BLVD., SUITE 200				Therapeutics		
NOVATO, CA 94949						

## **Signatures**

/s/ Kim R. Tsuchimoto, CFO, Raptor Pharmaceutical Corp.,
Attorney-in-fact
04/13/2012

\*\*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) Original option vests 6/48ths on October 16, 2009 and 1/48th per month thereafter.

#### **Remarks:**

Dr. Rioux is the Chief Medical Officer of Raptor Therapeutics Inc., a wholly-owned subsidiary of the Issuer, Raptor Pharmace 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.

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