Raptor Pharmaceutical Corp Form 4 July 09, 2014

### FORM 4

Check this box

if no longer

subject to

Section 16.

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

OMB APPROVAL

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Form 4 or
Form 5
obligations
may continue.

See Instruction

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

(Print or Type Responses)

1(b).

1. Name and Address of Reporting Person ** Keltner Llew			2. Issuer Name and Ticker or Trading Symbol Raptor Pharmaceutical Corp [RPTP]				s	5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)			
(Last)  C/O RAPT	OR	(Middle)		Day/Year)	Fransaction		_	_X Director Officer (give to below)	10%	Owner r (specify	
	CEUTICAL COR ON LANDING, S										
				iled(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
NOVATO,	, CA 94949						- F	Form filed by Mo Person	ore than One Rep	porting	
(City)	(State)	(Zip)	Tab	ole I - Non	-Derivative	Secu	rities Acqui	red, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any (Month/D	Date, if	3. Transacti Code (Instr. 8)	omr Dispos (Instr. 3,	sed of (		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	07/07/2014(1)			M	9,490	A	\$ 2.02	9,490	D		
Common Stock	07/07/2014(1)			M	510	A	\$ 2.97	10,000	D		
Common	07/07/2014 <sup>(1)</sup>			S	10 000	D	\$ 11 2129	0	D		

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

S

10,000 D

11.2129 0

(4)

D

07/07/2014(1)

Stock

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SEC 1474 (9-02)

> 8. I De Sec (In

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. 5. Number Transaction Derivative Code Securities (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exer Expiration D (Month/Day/	ate	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock options (right to buy)	\$ 2.02	07/07/2014(1)		M	9,490	(2)	03/09/2020	Common Stock	9,490
Stock options (right to buy)	\$ 2.97	07/07/2014(1)		M	510	(3)	10/12/2020	Common Stock	510

# **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Keltner Llew C/O RAPTOR PHARMACEUTICAL CORP. 7 HAMILTON LANDING, SUITE 100 NOVATO, CA 94949	X					

## **Signatures**

/s/ Mark Jones, Raptor Pharmaceutical Corp., Attorney-in-Fact

07/09/2014

\*\*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) Transaction made pursuant to a 10b5-1 trading plan adopted by the Reporting Person on August 14, 2013.

Reporting Owners 2

#### Edgar Filing: Raptor Pharmaceutical Corp - Form 4

- (2) Fully vested and exercisable.
- (3) Stock options vest 6/48ths on February 28, 2011 and 1/48th per month thereafter.

This transaction was executed in multiple trades at prices ranging from \$10.89 to \$11.61. The price reported above reflects the weighted

(4) average sale price. The reporting person hereby undertakes to provide, upon request, to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.

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.