Wentworth Kerry Form 3/A January 02, 2018

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

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB APPROVAL** 

**OMB** Number:

response...

3235-0104

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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. Name and Address of Reporting 2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol Person \* Statement Flexion Therapeutics Inc [FLXN] Wentworth Kerry (Month/Day/Year) 12/21/2017 (Last) (First) (Middle) 4. Relationship of Reporting 5. If Amendment, Date Original Person(s) to Issuer Filed(Month/Day/Year) C/O FLEXION 12/29/2017 (Check all applicable) THERAPEUTICS, INC., 10 MALL ROAD, SUITE 301 10% Owner Director \_X\_\_ Officer (Street) Other 6. Individual or Joint/Group (give title below) (specify below) Filing(Check Applicable Line) Chief Regulatory Officer \_X\_ Form filed by One Reporting

### BURLINGTON, MAÂ 01803

(City)

(Instr. 4)

Table I - Non-Derivative Securities Beneficially Owned

(State) 1. Title of Security

> Beneficially Owned (Instr. 4)

2. Amount of Securities

3. Ownership Form:

4. Nature of Indirect Beneficial Ownership

Reporting Person

Form filed by More than One

Person

(Instr. 5)

Direct (D) or Indirect (I)

(Instr. 5) Â D

Common Stock

3,974 (1)

SEC 1473 (7-02)

4.

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

(Zip)

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currently valid OMB control number.

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)

2. Date Exercisable and 3. Title and Amount of **Expiration Date** (Month/Day/Year)

Securities Underlying **Derivative Security** (Instr. 4)

5. Conversion Ownership or Exercise Form of

6. Nature of Indirect Beneficial Ownership (Instr. 5)

Price of Derivative Derivative Security:

### Edgar Filing: Wentworth Kerry - Form 3/A

Date Expiration Title Amount or Security Direct (D)

Exercisable Date Number of Shares (I)

(Instr. 5)

# **Reporting Owners**

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Wentworth Kerry C/O FLEXION THERAPEUTICS, INC. 10 MALL ROAD, SUITE 301 BURLINGTON, MA 01803	Â	Â	Chief Regulatory Officer	Â

# **Signatures**

/s/ Mark S. Levine,
Attorney-in-Fact

\*\*Signature of Reporting Person

Date

# **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, see Instruction 5(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) The Form 3 is being amended to correct the number of shares beneficially held directly.

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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