CLIFT VAUGHAN LENNOX

Form 4 May 09, 2012

FORM 4

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

SECURITIES

OMB Number:

Check this box if no longer STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

3235-0287 January 31, Expires: 2005

OMB APPROVAL

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obligations

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

may continue. See Instruction

1(b).

C/O AMPIO

(Print or Type Responses)

1. Name and Address of Reporting Person * **CLIFT VAUGHAN LENNOX**

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to Issuer

Symbol

Ampio Pharmaceuticals, Inc.

(Check all applicable)

[AMPE]

(Last) (First) (Middle) 3. Date of Earliest Transaction

Director 10% Owner X_ Officer (give title Other (specify below)

(Month/Day/Year)

05/07/2012

Chief Regulatory Affairs

PHARMACEUTICALS, INC, 5445 DTC PARKWAY, SUITE 925

(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 Form filed by More than One Reporting

Person

GREENWOOD VILLAGE, CO 80111

> (State) (City) (Zip)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1.Title of Security (Instr. 3)

2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if

(Month/Day/Year)

4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) 5. Amount of Securities Beneficially Owned Following Reported

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial Ownership (Instr. 4) (Instr. 4)

(A) Transaction(s) or (Instr. 3 and 4)

Code V Amount (D) Price

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)

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| 1. Title of | 2. | 3. Transaction Date | 3A. Deemed | 4. | 5. Number of | 6. Date Exer | cisable and | 7. Title and A | Amount of | |
|--------------------------------------|-------------|---------------------|--------------------|-------------|-------------------|---------------------|--------------------|-----------------|----------------------------------|--|
| Derivative | Conversion | (Month/Day/Year) | Execution Date, if | Transaction | onDerivative | Expiration I | Expiration Date | | Underlying Securities | |
| Security | or Exercise | | any | Code | Securities | (Month/Day | /Year) | (Instr. 3 and | 4) | |
| (Instr. 3) | Price of | | (Month/Day/Year) | (Instr. 8) | Acquired (A) | or | | | | |
| | Derivative | | | | Disposed of (I |)) | | | | |
| | Security | | | | (Instr. 3, 4, and | d | | | | |
| | | | | | 5) | | | | | |
| | | | | Code V | (A) (I | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | |
| Stock Option (right to buy) | \$ 2.76 | 05/07/2012 | | A | 150,000 | <u>(1)</u> | 05/07/2022 | Common Stock | 150,000 | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | |
|--|---------------|-----------|--------------------------------|-------|--|--|
| • 6 | Director | 10% Owner | Officer | Other | | |
| CLIFT VAUGHAN LENNOX C/O AMPIO PHARMACEUTICALS, INC 5445 DTC PARKWAY, SUITE 925 GREENWOOD VILLAGE, CO 80111 | | | Chief Regulatory Affairs | | | |

Signatures

/s/ Mark D. McGregor, by power of attorney 05/08/2012

**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) The stock option vests and becomes exercisable in 36 equal monthly installments from the grant date (May 7, 2012).

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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