Edgar Filing: MCPHERRON MATTHEW V - Form 4

Form 4	ON MATTHEW	V							
May 18, 2012								OMB A	PPROVAL
FORM	STATES	CS SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549					-	3235-0287	
Check thi									January 31,
if no long subject to Section 1 Form 4 or	6. SIAIE N	STATEMENT OF CHANGES IN BENEF					ICIAL OWNERSHIP OF		2005 average urs per
Form 5 obligatior may conti See Instru 1(b).	Filed pur ¹⁵ Section 17((a) of the	response 0.5 nant to Section 16(a) of the Securities Exchange Act of 1934, of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940						. 0.5
(Print or Type R	Responses)								
1. Name and Address of Reporting Person <u>*</u> MCPHERRON MATTHEW V			2. Issuer Name and Ticker or Trading Symbol MAP Pharmaceuticals, Inc. [MAPI			-	5. Relationship of Reporting Person(s) to Issuer		
(Last)	Middle)	· · · ·			C. [MAPP]	(Check all applicable)			
C/O BROOKSIDE CAPITAL, LLC, JOHN HANCOCK TOWER,			3. Date of Earliest Transaction (Month/Day/Year) 05/17/2012			X_ Director 10% Owner Officer (give title Other (specify below) below)			
200 CLARE	NDON STREET	Г							
(Street) BOSTON, MA 02116			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 			
BOSTON, N	MA 02110						Person		
(City)	(State)	(Zip)	Tab	ole I - Non-l	Derivative	Securities A	cquired, Disposed	of, or Beneficia	ally Owned
	2. Transaction Date (Month/Day/Year)		Date, if	3. Transactio Code (Instr. 8)		(A) or of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code V	Amount	(D) Price	(Instr. 3 and 4)		
Reminder: Rep	ort on a separate line	e for each cl	lass of sec	urities bene	ficially ow	ned directly o	or indirectly.		
					inforn requii	nation cont red to respo lys a currer	pond to the colle ained in this form ond unless the fo ntly valid OMB co	n are not orm	SEC 1474 (9-02)
	Tab					posed of, or convertible s	Beneficially Owne securities)	d	
1. Title of 2.	3. Trans	saction Date	e 3A. Dee	emed	4.	5. Number	of 6. Date Exerc	isable and	7. Title and Amount of

Derivative Conversion (Month/Day/Year) Execution Date, if TransactionDerivative

Expiration Date

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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).

The option is exercisable as it vests: 1/12th of the total number of option shares becomes exercisable cumulatively each month following
 the grant date over the following 12 months, so that the entire number of option shares will become fully vested and exercisable on the one year anniversary from the grant date on the condition that vesting continue while the director remains a member of the board of

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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