

TREVENA INC  
Form 3  
January 30, 2014

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

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**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

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 Person *		2. Date of Event Requiring Statement	3. Issuer Name <b>and</b> Ticker or Trading Symbol	
Â Deegan Rosamond		(Month/Day/Year)	TREVENA INC [TRVN]	
(Last)	(First)	(Middle)	4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
		01/30/2014		
C/O TREVENA, INC.,Â 1018 WEST 8TH AVENUE, SUITE A			(Check all applicable)	
(Street)			<input type="checkbox"/> Director	<input type="checkbox"/> 10% Owner
			<input checked="" type="checkbox"/> Officer	<input type="checkbox"/> Other
			(give title below)	(specify below)
			Sr VP, Bus Dev & Operations	
KING OF PRUSSIA,Â PAÂ 19406			6. Individual or Joint/Group Filing(Check Applicable Line)	
(City)	(State)	(Zip)	<input checked="" type="checkbox"/> Form filed by One Reporting Person	
			<input type="checkbox"/> Form filed by More than One Reporting Person	

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	31,149	D	Â

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

SEC 1473 (7-02)

**Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a 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 Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
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## Edgar Filing: TREVENA INC - Form 3

	Date Exercisable	Expiration Date		Amount or Number of Shares		or Indirect (I) (Instr. 5)	
Employee Stock Option (Right to Buy)	Â (1)	01/27/2020	Common Stock	302	\$ 0.062	D	Â
Employee Stock Option (Right to Buy)	Â (2)	09/10/2020	Common Stock	34,510	\$ 0.682	D	Â
Employee Stock Option (Right to Buy)	Â (3)	06/23/2021	Common Stock	570	\$ 0.682	D	Â
Employee Stock Option (Right to Buy)	Â (4)	06/17/2023	Common Stock	71,683	\$ 2.232	D	Â

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Deegan Rosamond C/O TREVENA, INC. 1018 WEST 8TH AVENUE, SUITE A KING OF PRUSSIA, PA 19406	Â	Â	Â Sr VP, Bus Dev & Operations	Â

## Signatures

/s/Derek Colla,  
Attorney-in-Fact

01/30/2014

\*\*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) Fully vested.

As of January 30, 2014, 31,451 of the shares underlying this option shall be vested. On April 8, 2014 and July 8, 2014, subject to the reporting person's continuous service to the issuer through such date, 2,419 and 640 shares underlying this option shall become vested, respectively.

(2) As of January 30, 2014, 522 of the shares underlying this option shall be vested. On April 8, 2014 and July 8, 2014, subject to the reporting person's continuous service to the issuer through such date, 37 and 11 shares underlying this option shall become vested, respectively.

(3) One-sixteenth of the shares vested on August 3, 2013 and one-sixteenth vest quarterly thereafter.

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.