## Edgar Filing: ARATANA THERAPEUTICS, INC. - Form 3

ARATANA THERAPEUTICS, INC.

Form 3

February 05, 2014

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

**OMB** 

3235-0104

**OMB APPROVAL** 

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

Number: Expires:

January 31, 2005

0.5

Estimated average burden hours per response...

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,

**SECURITIES** 

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 \*

 **RAINES MERILEE** 

(Last)

(First)

(Middle)

Statement

(Month/Day/Year)

02/05/2014

2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol

ARATANA THERAPEUTICS, INC. [PETX]

C/O ARATANA THERAPEUTICS, INC., Â 1901

**OLATHE BOULEVARD** 

(Street)

4. Relationship of Reporting Person(s) to Issuer

5. If Amendment, Date Original

Filed(Month/Day/Year)

(Check all applicable)

\_X\_ Director Officer

(give title below) (specify below)

10% Owner Other

6. Individual or Joint/Group Filing(Check Applicable Line)

\_X\_ Form filed by One Reporting Person

Form filed by More than One

Reporting Person

KANSAS CITY, ÂKSÂ 66103

(City) (State) (Zip)

1. Title of Security (Instr. 4)

2. Amount of Securities Beneficially Owned

(Instr. 4)

3. Ownership

Table I - Non-Derivative Securities Beneficially Owned

4. Nature of Indirect Beneficial Ownership

(Instr. 5) Form: Direct (D)

or Indirect (I) (Instr. 5)

Reminder: Report on a separate line for each class of securities beneficially

Date

owned directly or indirectly.

SEC 1473 (7-02)

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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** 

4 Conversion or Exercise Price of

5. Ownership Form of Derivative

Security:

Direct (D)

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

(Instr. 4)

**Expiration Title** 

Exercisable Date Amount or Number of

Derivative Security

Shares

or Indirect
(I)
(Instr. 5)

## **Reporting Owners**

KANSAS CITY, KSÂ 66103

Reporting Owner Name / Address

Director 10% Owner Officer Other

RAINES MERILEE

C/O ARATANA THERAPEUTICS, INC. 1901 OLATHE BOULEVARD

Relationships

Director 10% Owner Officer Other

 X Â Â

## **Signatures**

/s/ John C. Ayres as Attorney-in-Fact for Merilee Raines

02/05/2014

\*\*Signature of Reporting Person

Date

# **Explanation of Responses:**

#### No securities are beneficially owned

- \* 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).

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## **Remarks:**

Exhibit List: Exhibit 24 - Power of Attorney.

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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