Park Jeffrey G Form 4 May 25, 2018

FORM 4

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

OMB APPROVAL

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Form 4 or Form 5 obligations may continue. See Instruction

Check this box

if no longer

subject to

Section 16.

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

1(b).

(Last)

(Print or Type Responses)

1. Name and Address of Reporting Person * Park Jeffrey G

> (First) (Middle)

C/O DIPLOMAT PHARMACY, INC., 4100 S. SAGINAW ST.

(Street)

2. Issuer Name and Ticker or Trading Symbol

Diplomat Pharmacy, Inc. [DPLO]

3. Date of Earliest Transaction

4. If Amendment, Date Original

(Month/Day/Year) 05/23/2018

Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

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

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

X Form filed by One Reporting Person Form filed by More than One Reporting

FLINT, MI 48507

Common

Stock

(City) (State) (Zip)

05/23/2018

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

1.Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year) Execution Date, if (Instr. 3) (Month/Day/Year)

3. Transaction Disposed of (D) Code (Instr. 8)

4. Securities Acquired (A) (Instr. 3, 4 and 5)

5. Amount of Securities Beneficially Owned Following Reported Transaction(s)

Ownership Form: Direct (D) or Indirect (I)

(Instr. 4)

D

7. Nature of Indirect Beneficial Ownership (Instr. 4)

(A) or (Instr. 3 and 4) Amount (D) Price

(2)

Code V 13,875 $S^{(1)}$

(1)

\$ D 24.2022

41,448 (3)

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

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SEC 1474 (9-02)

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.	6. Date Exerc	cisable and	7. Title	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	TransactionNumber		Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underl	ying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative Securities Acquired			Securities (Instr. 3 and 4)		(Instr. 5)	Bene
	Derivative										Owne
	Security									Follo	
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						`
					4, and 5)						
									Amount		
						Date Exercisable	Expiration Date		or		
									Number		
									of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address

Director 10% Owner Officer Other

Park Jeffrey G

C/O DIPLOMAT PHARMACY INC

C/O DIPLOMAT PHARMACY, INC. 4100 S. SAGINAW ST. FLINT, MI 48507

X

Signatures

/s/ Christina Flint, by Power of Attorney

05/25/2018

**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 sales reported in this Form 4 represent shares sold to cover the tax liability incurred incident to the delivery of shares of common stock from previously awarded Restricted Stock Units.
- (2) The price represents the weighted average price of the multiple transactions reported on this line. The shares were sold at prices (2) ranging from \$24.025 to \$24.29 per share. Upon request by the SEC staff, the issuer or any securityholder of the issuer, the reporting person will provide full information regarding the number of shares sold at each separate price.
- (3) Number of securities in this column gives effect to the forfeiture of 21,666 shares underlying RSUs since the reporting persons most recent filing, as certain vesting conditions were not met.

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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