## Edgar Filing: ARRAY BIOPHARMA INC - Form 4

ARRAY BIOP	HARMA INC										
Form 4 December 29, 2	2016										
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FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								N OMB Number:	3235-0287		
Check this box if no longer CTLATED (EDUTE) OF CHANCES DUPENEED (LAL OWNED SHIP) OF								Expires:	January 31, 2005		
subject to Section 16. Form 4 or							DWNERSHIP OF Estimated average burden hours per response (				
Form 5 obligations may continu <i>See</i> Instructi 1(b).	e. Section 17(	a) of the l	Public U	Jtility Ho	olding Co		inge Act of 1934, t of 1935 or Secti 1940				
(Print or Type Res	ponses)										
1. Name and Address of Reporting Person <u>*</u> Squarer Ron			2. Issuer Name <b>and</b> Ticker or Trading Symbol			5. Relationship of Reporting Person(s) to Issuer					
			ARRAY BIOPHARMA INC [ARRY]				(Check all applicable)				
(Last) (First) (Middle)			3. Date of Earliest Transaction (Month/Day/Year)				Director 10% Owner Officer (give title Other (specify				
C/O ARRAY I INC., 3200 W.	12/27/2016			below) below) CEO							
	4. If Amendment, Date Original Filed(Month/Day/Year)			<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>							
BOULDER, C	O 80301						Person	More than one K	epotting		
(City)	(State)	(Zip)	Tab	ole I - Non	-Derivative	Securities A	Acquired, Disposed	of, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date any (Month/Day/				SecuritiesForm: DirectIndirectBeneficially(D) or IndirectBeneficiallyOwned(I)Owner		7. Nature of Indirect Beneficial Ownership (Instr. 4)					
			or Code V Amount (D) Pric			(Instr. 3 and 4)					
	<i>(</i> 1'	C 1 1	c								
Reminder: Report	on a separate line	for each ci	ass of sec	unties ben	Perso infor requi	ons who re nation con red to resp ays a curre	or indirectly. spond to the colle tained in this forn ond unless the fo ently valid OMB co	n are not rm	SEC 1474 (9-02)		
	Tab					sposed of, or convertible	r Beneficially Owner securities)	d			

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	Securities Acquired (A) of Disposed of (D (Instr. 3, 4, and 5)		/Year)	(Instr. 3 and	4)
				Code V	(A) (D	) Date Exercisable	Expiration Date	Title	Amount Number Shares
Restricted Stock Units	\$ 0	12/27/2016		А	93,750	<u>(1)</u>	12/28/2020	Common Stock	93,75(
Stock Option (Right to Buy)	\$ 8.79	12/27/2016		А	562,500	(2)	12/27/2026	Common Stock	562,50

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships						
	Director	10% Owner	Officer	Other			
Squarer Ron C/O ARRAY BIOPHARMA INC. 3200 WALNUT STREET BOULDER, CO 80301			CEO				
Signatures							
John R. Moore, attorney-in-fact for Person	12/29/2016						
<u>**</u> 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).

Consists of RSUs awarded to the reporting person for no additional cash consideration each of which represent a contingent right to (1) receive one share of Array BioPharma Inc. common stock. The RSUs vest and will be settled in stock in four equal annual installments

- beginning on December 16, 2017.
- (2) The option vests in four equal annual installments beginning on December 16, 2017.

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.