#### INFINITY PHARMACEUTICALS, INC.

Form 4

November 02, 2016

FURIN	UNITEI	) STATES				ND EXC D.C. 205		NGE (	COMMISSIO	N OMB Number:	3235-0287	7	
if no long subject to Section 10 Form 4 or Form 5 obligation may conti	Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction  See Instruction  STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES  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								burden heresponse	•	5		
(Print or Type R	desponses)												
1. Name and Address of Reporting Person * Tasker Seth A			2. Issuer Name <b>and</b> Ticker or Trading Symbol INFINITY PHARMACEUTICALS, INC. [INFI]						5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)				
(Last)  C/O INFINI PHARMAC MEMORIA	EUTICALS, IN	(Middle) NC., 784	3. Date of (Month/Date 10/31/20	ıy/Year)		nsaction			Director _X Officer (gi below)		0% Owner other (specify		
CAMBRIDO	(Street) GE, MA 02139		4. If Amen Filed(Mont			e Original			6. Individual or Applicable Line) _X_ Form filed by Form filed by Person		Person		
(City)	(State)	(Zip)	Table	I - Non	ı-De	erivative S	ecuri	ties Ac	quired, Disposed	of, or Benefic	ially Owned		
1.Title of Security (Instr. 3)	any			4. Securion Acquired Disposed (Instr. 3,	ties (A) of of (D	or )) 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		p 7. Nature of	Indirect Beneficial Ownership			
Common Stock	10/31/2016			Code A	V	Amount 8,917 (1)	(D)	Price \$ 0	8,917	D			
Common Stock									4,956.02	I	401(k)		
Reminder: Repo	ort on a separate li	ne for each c	lass of secur	ities ben	nefic	Person	s wh	o resp conta	indirectly.  cond to the collegined in this form	n are not	SEC 1474 (9-02)		

displays a currently valid OMB control

number.

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#### Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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	Transacti	orNumber	Expiration D	ate	Amount of		Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underl	lying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivativ	e		Securit	ties	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Own
	Security				Acquired						Follo
	·				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									A		
									Amount		
						Date	Expiration		or		
						Exercisable	Date		Number		
				C 1 W	(A) (D)				of		
				Code V	(A) (D)				Shares		

## **Reporting Owners**

Relationships Reporting Owner Name / Address

Director 10% Owner Officer Other

Tasker Seth A C/O INFINITY PHARMACEUTICALS, INC. 784 MEMORIAL DRIVE CAMBRIDGE, MA 02139

General Counsel

### **Signatures**

/s/ Seth A. 11/02/2016 Tasker

\*\*Signature of Date Reporting Person

# **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).

Represents shares from a grant of performance-based restricted stock on July 22, 2016. Upon the determination by the Compensation Committee of our Board of Directors, such shares vested in full on October 31, 2016. The number of shares in column 5 represents a net amount of shares issued to the reporting person after the issuer withheld 4,283 shares in order to satisfy the reporting person's income tax withholding obligation.

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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