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MARINUS PHARMACEUTICALS INC

Form 3

January 07, 2015

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

OMB APPROVAL

OMB Number:

3235-0104

0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

January 31, Expires: 2005

Estimated average burden hours per

response...

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 *

À Patroneva Albena

(Last)

(First)

(Middle)

Statement

(Month/Day/Year)

12/31/2014

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

MARINUS PHARMACEUTICALS INC [MRNS]

4. Relationship of Reporting

_X__ Officer

Person(s) to Issuer

5. If Amendment, Date Original

Filed(Month/Day/Year)

3 RADNOR CORP, Â CENTER 100 MATSONFORD RD, STE

C/O MARINUS PHARMA INC

304

(Street)

(Check all applicable) 10% Owner Director

Other (give title below) (specify below) Chief Medical Officer

6. Individual or Joint/Group

Filing(Check Applicable Line) _X_ Form filed by One Reporting

Person

Form filed by More than One

Reporting Person

RADNOR, Â PAÂ 19087

(City) (State)

1. Title of Security (Instr. 4)

(Zip)

2. Amount of Securities

Beneficially Owned (Instr. 4)

Ownership

Table I - Non-Derivative Securities Beneficially Owned

4. Nature of Indirect Beneficial

Ownership (Instr. 5)

Form: Direct (D) or Indirect (Instr. 5)

Reminder: Report on a separate line for each class of securities beneficially 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** (Instr. 4)

4. 5. Ownership Conversion or Exercise Form of Price of Derivative

Security:

Derivative

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

1

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Date Expiration Title Amount or Security Direct (D)

Exercisable Date Number of Shares (I)

(Instr. 5)

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Patroneva Albena C/O MARINUS PHARMA INC 3 RADNOR CORP CENTER 100 MATSONFORD RD, STE 304 RADNOR Â PAÂ 19087	Â	Â	Chief Medical Officer	Â

Signatures

/s/ Edward Smith Attorney-in-fact 01/05/2015

**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:

See attached Confirming Statement.

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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