

Shacham Sharon
Form 4
November 27, 2018

FORM 4

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

Check this box
if no longer
subject to
Section 16.
Form 4 or
Form 5
obligations
may continue.
See Instruction
1(b).

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF
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

OMB APPROVAL

OMB
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(Print or Type Responses)

1. Name and Address of Reporting Person *
Shacham Sharon

2. Issuer Name **and** Ticker or Trading
Symbol
Karyopharm Therapeutics Inc.
[KPTI]

5. Relationship of Reporting Person(s) to
Issuer

(Check all applicable)

(Last) (First) (Middle)
C/O KARYOPHARM
THERAPEUTICS INC., 85 WELLS
AVENUE

3. Date of Earliest Transaction
(Month/Day/Year)
11/26/2018

____ Director ____ 10% Owner
____X____ Officer (give title ____ Other (specify
below) below)
President & CSO

(Street)
NEWTON, MA 02459

4. If Amendment, Date Original
Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check
Applicable Line)
____X____ Form filed by One Reporting Person
____ Form filed by More than One Reporting
Person

(City) (State) (Zip)

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

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Common Stock	11/26/2018		M ⁽¹⁾		9,600	A	\$ 4.752	521,743	I	By Spouse
Common Stock	11/26/2018		S ⁽¹⁾		9,600	D	\$ 11	512,143	I	By Spouse
Common Stock								713,510	D	
Common Stock								47,309	I	By GRAT ⁽²⁾
								47,309	I	

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Common
Stock

By
Spouse's
GRAT ⁽³⁾

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

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(9-02)

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

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Title and Amount of Underlying Securities (Instr. 3 and 4)
				Code	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (right to buy)	\$ 4.752	11/26/2018		M ⁽¹⁾	9,600	⁽⁴⁾	09/02/2023	Common Stock	9,600

Reporting Owners

Reporting Owner Name / Address

Relationships

Director 10% Owner Officer Other

Shacham Sharon
C/O KARYOPHARM THERAPEUTICS INC.
85 WELLS AVENUE
NEWTON, MA 02459

President & CSO

Signatures

/s/ Christopher B. Primiano, Attorney-in-Fact for Sharon
Shacham

11/27/2018

 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) These transactions were effected pursuant to a Rule 10b5-1 trading plan adopted by the spouse of the reporting person.
- (2) These shares are held by the Sharon Shacham 2016 Qualified Annuity Interest Trust.
- (3) These shares are held by the Michael G. Kauffman 2016 Qualified Annuity Interest Trust.
- (4) This option, representing a right to purchase a specified number of shares, vested as to 25% of the shares on September 3, 2014, and the remaining 75% vested in 36 equal monthly installments thereafter.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure.

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