Global Blood Therapeutics, Inc.

Form 4

September 12, 2016

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

OMB Number:

Check this box if no longer subject to Section 16.

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

2005 Estimated average burden hours per response... 0.5

Expires:

**OMB APPROVAL** 

3235-0287

January 31,

Form 4 or Form 5 obligations may continue.

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

See Instruction

(Middle)

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* Radovich Peter

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to Issuer

Symbol

Global Blood Therapeutics, Inc.

(Check all applicable)

[GBT]

(Last) (First) 3. Date of Earliest Transaction

(Month/Day/Year)

Filed(Month/Day/Year)

09/08/2016

X\_ Officer (give title below)

Director

10% Owner Other (specify

C/O GLOBAL BLOOD THERAPEUTICS, INC., 400 EAST

(Street)

(State)

JAMIE COURT, SUITE 101

4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check

SVP, Operations

Applicable Line)

**SOUTH SAN** 

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

Person

FRANCISCO, CA 94080

(Zip)

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

1.Title of Security (Instr. 3)

(City)

2. Transaction Date 2A. Deemed (Month/Day/Year)

Execution Date, if (Month/Day/Year)

4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) 5. Amount of Securities Beneficially Owned Following

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial Ownership (Instr. 4) (Instr. 4)

(A) or

Reported Transaction(s) (Instr. 3 and 4)

Code V Amount (D) Price

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

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

### Edgar Filing: Global Blood Therapeutics, Inc. - Form 4

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 on Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration Date (Month/Day/Year) A) d of		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option (Right to Buy)	\$ 19.89	09/08/2016		A	25,000	<u>(1)</u>	09/07/2026	Common Stock	25,000

# **Reporting Owners**

Reporting Owner Name / Address	Relationships					
coposing of the state of the state of	Director	10% Owner	Officer	Other		
Radovich Peter						
C/O GLOBAL BLOOD THERAPEUTICS, INC.			SVP,			
400 EAST JAMIE COURT, SUITE 101			Operations			
SOUTH SAN FRANCISCO, CA 94080						

# **Signatures**

/s/ Matt Krause as Attorney-in-Fact 09/12/2016

\*\*Signature of Reporting Person D

## **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 shares subject to this option shall vest and become exercisable in 16 equal quarterly installments, with the first installment on December 8, 2016, subject to the recipient's continued service with the Issuer.

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.

Reporting Owners 2