

DAVE KAUSHIK J
Form 3
June 08, 2011

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

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INITIAL STATEMENT OF 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

(Print or Type Responses)

1. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name and Ticker or Trading Symbol	
Â DAVE KAUSHIK J		(Month/Day/Year)	ANTARES PHARMA, INC. [AIS]	
(Last)	(First)	(Middle)	06/01/2011	
250 PHILLIPS BLVD,Â SUITE 290			4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
(Street)			(Check all applicable)	
EWING,Â NJÂ 08618			<input type="checkbox"/> Director <input type="checkbox"/> 10% Owner	6. Individual or Joint/Group Filing(Check Applicable Line)
(City)	(State)	(Zip)	<input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other	<input checked="" type="checkbox"/> Form filed by One Reporting Person
			(give title below) (specify below)	<input type="checkbox"/> Form filed by More than One Reporting Person
			Executive Vice President	

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	141,552 ⁽¹⁾	D	Â

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. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
		Title			

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	Date Exercisable	Expiration Date	Amount or Number of Shares	or Indirect (I) (Instr. 5)
Stock Option (right to buy)	Â (2)	05/13/2018	Common Stock 125,000	\$ 0.85 D Â
Stock Option (right to buy)	Â (2)	11/11/2018	Common Stock 175,000	\$ 0.47 D Â
Stock Option (right to buy)	Â (2)	12/04/2018	Common Stock 25,000	\$ 0.37 D Â
Stock Option (right to buy)	Â (2)	08/11/2019	Common Stock 25,000	\$ 0.95 D Â
Stock Option (right to buy)	Â (2)	11/11/2019	Common Stock 75,000	\$ 1.1 D Â
Stock Option (right to buy)	Â (2)	11/10/2020	Common Stock 75,000	\$ 1.52 D Â
Stock Option (right to buy)	Â (2)	05/16/2021	Common Stock 51,000	\$ 1.66 D Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
DAVE KAUSHIK J 250 PHILLIPS BLVD SUITE 290 EWING, NJ 08618	Â	Â	Â Executive Vice President	Â

Signatures

Robert F. Apple as attorney-in-fact for Kaushik J. Dave 06/08/2011

Signature of Reporting Person

Date

Explanation of Responses:

* 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).

Includes: (i) 89,937 shares issued to and owned by Dr. Dave; (ii) 19,615 shares of restricted common stock, par value \$0.01 per share, issued under the Antares Pharma, Inc. 2008 Equity Compensation Plan that will vest 100% on February 22,2013; and (iii) 32,000 shares representing the target number of shares Dr. Dave may receive pursuant to the terms of the performance stock unit award made to Dr. Dave under the 2008 Equity Compensation Plan if certain performance goals are attained over the three-year period beginning January 1, 2011 and ending December 31, 2013 and Dr. Dave continues in employment with the Company through that period.

(2) The options vest in equal quarterly installments over three years beginning ten years prior to the expiration date.

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Remarks:

ExhibitÂ Index:

ExhibitÂ 24,Â PowerÂ ofÂ Attorney

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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