Edgar Filing: HOBDEN ADRIAN N - Form 4

HOBDEN A	ADRIAN N										
Form 4											
June 08, 20	09										
FORM	ORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL		
	Washington, D.C. 20549						OMMISSION	OMB Number:	3235-0287		
Check this box										January 31,	
if no lor subject		MENT OF	CHAN	NGES IN	BENEF	ICIA	L OWN	ERSHIP OF	Expires: 2005 Estimated average		
-	Section 16. SECURITIES							burden hours per			
Form 4									response	0.5	
Form 5 obligation	nn a *						•	Act of 1934,			
may cor				-	-	-	-	1935 or Section			
See Inst		30(h) c	of the I	nvestmen	t Compar	ny Ac	ct of 1940)			
1(b).											
(Print or Type	Responses)										
(I fint of Type	(csponses)										
1. Name and	Address of Reporting	Person *	2. Issuer Name and Ticker or Trading				no	5. Relationship of Reporting Person(s) to			
HOBDEN ADRIAN N								Issuer			
(Last)	(First) (of Earliest T		L		(Check	all applicable)	
(Last)	(11150)			Day/Year)	ransaction			Director	10%	Owner	
320 WAKA	ARA WAY		06/08/2	•				Officer (give t		r (specify	
			00/00/2	2007				below) Pros. Muri	below)	ionla	
									ad Pharmaceut		
								6. Individual or Joint/Group Filing(Check			
			Filed(Mo	onth/Day/Yea	ar)			Applicable Line) _X_ Form filed by Or	ne Reporting Per	rson	
SALTLA	KE CITY, UT 841	08						Form filed by Mo			
SILLI LIII		100						Person			
(City)	(State)	(Zip)	Tab	ole I - Non-	Derivative	Secu	rities Acqu	ired, Disposed of,	or Beneficial	ly Owned	
1.Title of	2. Transaction Date	2A. Deeme	d	3.	4. Securiti	es Ac	quired (A)	5. Amount of	6.	7. Nature of	
Security	(Month/Day/Year)	Execution I	Date, if	f Transaction Disposed of (D) Code (Instr. 3, 4 and 5)				Securities Beneficially Owned	OwnershipIndirectForm:BeneficiDirect (D)Ownersh		
(Instr. 3)		any (Month/Day	(Veer)							Beneficial Ownership	
		(WOIIII/Da	y/10al)	(111501.0)				Following	or Indirect	(Instr. 4)	
						(A)		Reported	(I)		
						or		Transaction(s)	(Instr. 4)		
				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common	06/08/2009			М	7,980	А	\$	204,893	D		
Stock	00/00/2007			141	7,900	11	12.5313	204,075	D		
Common	06/08/2009			М	29,178	А	\$ 10.28	234,071	D		
Stock											

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

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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 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. 5. Number of TransactiorDerivative Code Securities (Instr. 8) 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)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Incentive Stock Option (right to buy)	\$ 10.28	06/08/2009		М	29,178	<u>(1)</u>	09/14/2015	Common Stock	29,178
Incentive Stock Option (right to buy)	\$ 12.5313	06/08/2009		М	7,980	(2)	04/20/2010	Common Stock	7,980

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director 10% Owner Officer		Officer	Other			
HOBDEN ADRIAN N 320 WAKARA WAY SALT LAKE CITY, UT 84108			Pres. Myriad Pharmaceuticals				
Signatures							
Dev Distant Mansh East Advisor	NT						

By: Richard Marsh For: Adrian N. 06/08/2009 Hobden

Explanation of Responses:

**Signature of Reporting Person

- 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). **

Date

- The combined Incentive Stock Option and Non-Qualified Stock Option grants vest 25% annually beginning on the first anniversary date (1) of the option grant, subject to statutory ISO limitations.
- (2) 20% vests annually beginning on the 1st anniversary of the date of the Option Grant.

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.