SEC Form 4

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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| OMB APPROVAL | | | | | | | | | | |
|-----------------------|-----------|--|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | | |
| Estimated average bur | den | | | | | | | | | |
| hours per response: | 0.5 | | | | | | | | | |

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|---|--|-------------------|-------------------|---|----------------|----------------------------|--|--|------------------|-----------|--|
| 1. Name and Address of Reporting Person [*] Getman Daniel P | | | | er Name and Ticker <u>mpo Pharmac</u> | υ. | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | |
| (Last) (First) (Middle) 4520 EAST WEST HWY, 3RD FLOOR | | | 3. Date 05/22/ | of Earliest Transac /2013 | tion (Month/D | ay/Year) | | Officer (give title below) | Other below) | (specify | |
| (Street) BETHESDA (City) | MD (State) | US 20814 (Zip) | 4. If An | nendment, Date of C | Driginal Filed | Month/Day/Year) | 6. Indiv Line) X | idual or Joint/Group Form filed by One Form filed by Mor Person | e Reporting Pers | on | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | |
| 1. Title of Security | (Instr. 3) | | 2. Transaction | 2A. Deemed | 3. | 4. Securities Acquired (A) | | 5. Amount of | 6. Ownership | 7. Nature | |

| or Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | EXECUTION DATE, if any (Month/Day/Year) | Code (Instr. | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | | Securities Beneficially Owned Following | (D) or Indirect | 7. Nature of Indirect Beneficial Ownership | |
|------------------------|--|---|--------------|---|---|---------------|-------|--|-----------------|---|--|
| | | | Code | v | Amount | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | | (Instr. 4) | |

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

| | (0.3., parts, canada, opnical, controlation coordinated) | | | | | | | | | | | | | | |
|---|---|--|---|------------------------------|---|---|---|---------------------|--|----------------------------|---|-----|--|--|--|
| 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. Transa Code (8) | | of Derivati Securiti Acquire (A) or Dispose of (D) (I | of Exp Derivative (Mor Securities Acquired | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |
| Director Stock Option (Right to Buy) | \$8.62 | 05/22/2013 | | A | | 20,000 | | (1) | 05/22/2023 | Class A Common Stock | 20,000 | \$0 | 70,000 | D | |

Explanation of Responses:

1. The options vest in twelve equal monthly installments.

/s/ Daniel P. Getman

05/30/2013

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

* 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).

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

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.

** Signature of Reporting Person

Date