## Edgar Filing: Spark Therapeutics, Inc. - Form 4

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Form 4										
January 20,	2017									
FORM	14							PPROVAL		
	UNITED	STATES			AND EXCHANG , D.C. 20549	E COMMISSION	OMB Number:	3235-0287		
Check t if no lo	MENT O	F CHAI	- NGES IN	Expires:	January 31, 2005					
subject Section			SECUI	Estimated burden hou response	urs per					
Form 4 Form 5										
obligati may con	obligations may continue. See Instruction See Instruction Obligations May continue. See Instruction Obligations May continue. May continue. See Instruction Obligations May continue. May continue. Ma									
(Print or Type										
1. Name and Address of Reporting Person <u>*</u> La Barge Joseph			2. Issuer Name <b>and</b> Ticker or Trading Symbol			5. Relationship of Reporting Person(s) to Issuer				
		Spark Therapeutics, Inc. [ONCE]			(Check all applicable)					
(Last) (First) (Middle)			3. Date of	of Earliest T	ransaction	(Che	ck all applicabl	()		
			(Month/Day/Year)			Director 10% Owner				
3737 MARKET STREET, SUITE 1300			01/18/2017			XOfficer (give titleOther (specify below) General Counsel				
(Street)			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				
PHILADE	LPHIA, PA 1910	4					More than One R			
(City)	(State)	(Zip)	Tab	ole I - Non-J	Derivative Securities	Acquired, Disposed o	f, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deem Execution any (Month/D	Date, if	3. Transactio Code (Instr. 8)	4. Securities onAcquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		

or Code V Amount (D) Price

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

(A)

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 control number.

Reported

Transaction(s)

(Instr. 3 and 4)

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8	Acquired or Dispose (D) (Instr. 3, 4 and 5)	ed of				
				Code V	7 (A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option (right to buy)	\$ 56.17	01/18/2017		А	25,000		<u>(1)</u>	01/17/2027	Common Stock	25,000
Restricted Stock Units	(2)	01/18/2017		А	7,000		(3)	(3)	Common Stock	7,000

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
La Barge Joseph							
3737 MARKET STREET			General				
SUITE 1300			Counsel				
PHILADELPHIA, PA 19104							
Signatures							

/s/ Joseph W. La Barge 01/20/2017 <u>\*\*</u>Signature of Date Reporting Person

## **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) 25% vests January 18, 2018 and the remainder vests in equal annual installments over the following three years.
- (2) Each restricted stock unit represents a contingent right to receive one share of Spark Therapeutics common stock.
- (3) The restricted stock units vest in four equal annual installments beginning January 18, 2018. Vested shares will be delivered to the reporting person annually on the vesting date.

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.