Edgar Filing: Spark Therapeutics, Inc. - Form 4

Form 4	peutics, Inc.										
October 14, 2	2015										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMMISSION	OMB AF OMB	PROVAL 3235-0287	
Check thi	is box	Washington, D.C. 20549									
if no long subject to Section 1 Form 4 o Form 5 obligation may cont	6. Filed pur	IENT OF suant to Se a) of the P	ection 10	SECUR 6(a) of the	Expires: January 31, 2005 Estimated average burden hours per response 0.5						
See Instru 1(b).		30(h) o	f the In	vestment	Compan	y Act	of 194	0			
(Print or Type F	Responses)										
			2. Issuer Name and Ticker or Trading Symbol Spark Therapeutics, Inc. [ONCE]					5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (N		3. Date of Earliest Transaction (Chec					k all applicable)			
	X THERAPEUTI MARKET STRE)	CS,	Month/D 10/13/20	ay/Year)				X Director X Officer (give below) Se		Owner r (specify	
				onth/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
PHILADEL	PHIA, PA 19104							Form filed by M Person	ore than One Re	porting	
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Acqu	uired, Disposed of,	or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	(Month/Day/Year) Execution Date, i		Date, if	Code (Instr. 3, 4 and 5)				5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	Ownership Form: Direct (D) or	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common Stock	10/13/2015			S	10,000	D	\$ 48	330,000	D		
Common Stock	10/14/2015			S	20,000	D	\$ 49	310,000	D		
Common Stock	10/14/2015			S	10,000	D	\$ 50.03 (1)	300,000	D		

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)

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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	2.	3. Transaction Date		4.	5.	6. Date Exerc		7. Title and		9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration Da	ate	Amount of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underlying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	9		Securities	(Instr. 5)	Bene
	Derivative				Securities			(Instr. 3 and	14)	Owne
	Security				Acquired					Follo
					(A) or					Repo
					Disposed					Trans
					of (D)					(Instr
										(insu
					(Instr. 3, 4 and 5)					
					4, and 5)					
								Amo	unt	
								or		
						Date	Expiration	Title Num	ber	
						Exercisable Date	Date	of		
				Code V	(A) (D)			Share	95	
				Coue v	(A) (D)			Share	65	

Reporting Owners

Reporting Owner Name / Address	Relationships					
1 5	Director	10% Owner	Officer	Other		
High Katherine A C/O SPARK THERAPEUTICS, INC. 3737 MARKET STREET, SUITE 1300 PHILADELPHIA, PA 19104	х		See Remarks			
Signatures						
/s/ Joseph W. La Barge, attorney-in-fact High	10/14/2015					
<u>**</u> Signature of Reporting Person	Date					

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).

The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$50.00 to \$50.17, inclusive. The reporting person undertakes to provide to Spark Therapeutics, Inc., any security holder of Spark Therapeutics,

(1) Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in footnote (1) to this Form 4.

Remarks:

President and Chief Scientific Officer

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.