## Edgar Filing: LIGAND PHARMACEUTICALS INC - Form 4

LIGAND PH Form 4 July 01, 2014	IARMACEUTIC	ALS INC	-								
<b>FORN</b> Check th if no long subject to Section 1 Form 4 of Form 5 obligatio may cont <i>See</i> Instru 1(b).	is box ger STATEM 6. r Filed purs ns Section 17(a	<b>IENT OF</b> suant to S a) of the F	Was CHAN ection 1 Public Ut	shington, IGES IN SECUR 6(a) of th	D.C. 20 BENEF UTIES e Securit ding Con	549 ICIA ties E	LOWN Exchange y Act of	OMMISSION ERSHIP OF Act of 1934, 1935 or Section	OMB Number: Expires: Estimated a burden hour response		
FOEHR MATTHEW W Syn LIC				r Name <b>and</b> D PHARI GND]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(				<ul><li>3. Date of Earliest Transaction</li><li>(Month/Day/Year)</li><li>06/30/2014</li></ul>				Director 10% Owner X_ Officer (give title Other (specify below) EVP and COO			
(Street) 4. If Amendment, Date Original Filed(Month/Day/Year) LA JOLLA, CA 92037					<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> <li>Person</li> </ul>						
(City)	(State)	(Zip)	Tabl	e I - Non-D	Derivative	Secur	ities Acqu	iired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	3. Transactio Code (Instr. 8) Code V	4. Securit n(A) or Di (Instr. 3, Amount	sposed	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	06/30/2014	06/30/20	)14	P <u>(1)</u>	428	А	\$ 43.792	53,885	D		

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

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.

 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)	4. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Under Secur	rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
FOEHR MATTHEW W 11119 NORTH TORREY PINES ROAD, SUITE 200 LA JOLLA, CA 92037	)		EVP and COO				
Signatures							
By: Nishan M. de Silva For: Matthew W. Foehr	07/01/2014	Ļ					
**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).

(1) Shares Acquired under Ligand's employee stock purchase plan.

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.