### FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	DC	20549
wasinington,	D.C.	20343

# STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
OMB Number:	3235-0287						
Estimated average burden							
hours per response	. 0.5						

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

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

Name and Address of Reporting Person* <u>STEIN EVAN A.</u>															all applicat Director			10% Owner		
	,	First) RMACEUTICAI RE WAY	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 11/09/2014									Officer (g below)	jive title	Other (specif below)		pecify		
(Street) BURNA		.1 State)	V5G 4W8		4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv Line) X	vidual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting Person						
(City)	(0	,		n-Deriv	ative s	Seci	ırities Ac		ired	Disi	nosed (	of or	Ber	nefic	ially (	Owned				
1. Title of Security (Instr. 3)		2. Transa Date			2A. Deemed Execution Date,		3. Transaction Code (Instr.		4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a			or 5. Amoun and 5) Securities Beneficial Owned Fo		у	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount		(A) o (D)	r Pı	rice	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common	Shares			11/09/	2014				С		967	7	A		(1)	96	7		I 1	By Stein Family LLC <sup>(2)</sup>
Common	Shares			11/09/	2014				С		1,038,	964	A		(3)	1,038	,964	By Lipote Ltd. <sup>(4)</sup>		Lipoterx,
			Table II -				ities Acq warrants									vned				
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/Yea	Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisa Expiration Date (Month/Day/Yea			Securities Underly		ying	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transactio	re es ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)		
				Code	e V	(A)	(D)	Dat Exe	te ercisabl		xpiration ate	Title		Amou Numb Share	er of		(Instr. 4)	10/1(5)		
Series B Preferred Shares	(1)	11/09/2014		С			967		(1)		(1)	Comi		90	67	\$0.00	0		I	By Stein Family LLC <sup>(2)</sup>
Series E Preferred Shares	(3)	11/09/2014		С			1,038,964		(3)		(3)	Comi		1,038	3,964	\$0.00	0		I	By Lipoterx, Ltd. <sup>(4)</sup>

#### **Explanation of Responses:**

- 1. The Series B Preferred Shares converted into Common Shares on a 1-for-1 basis immediately prior to the completion of the Issuer's initial public offering of Common Shares and had no expiration date.
- 2. These shares are held by the Stein Family LLC, for which the Reporting Person serves as the managing member.
- 3. The Series E Preferred Shares converted into Common Shares on a 1.2-for-1 basis immediately prior to the completion of the Issuer's initial public offering of Common Shares and had no expiration date.
- 4. These shares are held by Lipoterx, Ltd. ("Lipoterx"). Lipoterx Holdings, LLC, the general partner of Lipoterx, has sole voting and investment power with respect to the shares held by Lipoterx. The Reporting Person, the managing partner of Lipoterx Holdings, LLC has sole voting and investment power with respect to the shares held by Lipoterx.

## Remarks:

/s/ Barbara A. Mery, Attorneyin-fact

11/09/2014

\*\* Signature of Reporting Person

Date

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.