SEC Form 3

FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## **INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

OMB APPROVAL OMB Number: 3235-0104

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

1. Name and Address of Reporting Person* <u>VOGELBAUM MARTIN</u>			2. Date of Event Requiring Statement (Month/Day/Year) 02/17/2015 3. Issuer Name and Ticker or Trading Symbol INOTEK PHARMACEUTICALS CORP [ ITEK ]								
C/O RHO VEN		(Middle)			4. Relationship of Reporting Perso (Check all applicable) X Director				5. If Amendment, Date of Original Filed (Month/Day/Year)		
152 WEST 57TH STREET, 23RD FLOOR					Officer (give title below)				5. Individual or Joint/Group Filing (Check Applicable Line)		
(Street) NEW YORK	NY	10019							For	-	y One Reporting Person y More than One erson
(City) (	(State)	(Zip)									
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)					2. Amount of Securities Beneficially Owned (Instr. 4)				4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Table II - Derivative Securities Beneficially Owned   (e.g., puts, calls, warrants, options, convertible securities)											
1. Title of Derivative Security (Instr. 4)		str. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securit Underlying Derivative Securit			4. Conversi or Exerci	ise Forn	5. Ownership Form: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
			Date Exercisable	Expiratior Date	n Title		Amount or Number of Shares	Price of Derivativ Security	e or In	ct (D) direct 1str. 5)	
Stock Options (r	right to buy)		(1)	02/28/2024	1	Common Stock	9,857	4.342		D	
Explanation of Responses:											

1. These options are fully vested.

**Remarks:** 

/s/ Martin Vogelbaum

\*\* Signature of Reporting Person

02/17/2015

Date

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

 $\ast$  If the form is filed by more than one reporting person, see Instruction 5 (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.