SEC Form 3

FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL
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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 States (Month/Day/Yea 02/17/2015	ment	3. Issuer Name and Ticker or Trading Symbol <u>INOTEK PHARMACEUTICALS CORP</u> [ITEK]							
(Last) C/O RHO VE 152 WEST 57 (Street) NEW YORK (City)	TH STREET, 1	(Middle) 23RD FLOOR 10019 (Zip)	02/17/2015			tionship of Reporting Perso all applicable) Director Officer (give title below)	10% Owne	0% Owner hther (specify		 5. If Amendment, Date of Original Filed (Month/Day/Year) 02/17/2015 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person 		
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)		2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securi Underlying Derivative Securit			4. Conve or Exe	rcise	5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)		
		Date Expiration Exercisable Date		n Title		Amount or Number of Shares	Price of Derivative Security					
Stock Options	(right to buy)		(1)	08/28/202	4	Common Stock	9,857	4.3	42	D		
Explanation of R	esponses:			7			7	-			1	

1. These options are fully vested.

Remarks:

/s/ Martin Vogelbaum

** Signature of Reporting Person

02/18/2015

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 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.