### Edgar Filing: ARRAY BIOPHARMA INC - Form 4

ARRAY BIC Form 4	OPHARMA INC										
July 25, 2013	Л									PPROVAL	
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							Number:	3235-0287 January 31			
if no long subject to Section 10 Form 4 on Form 5 obligatior may conti <i>See</i> Instru 1(b).	er <b>STATEN</b> 6. Filed pur <sup>15</sup> Section 17(	suant to S a) of the l	Section 10 Public Ut	<b>SECUR</b> 6(a) of the	ITIES e Securiti ling Com	es Ex	chang Act of	NERSHIP OF e Act of 1934, E 1935 or Sectio 40	Expires: Estimated a burden hou response n	2005 average	
(Print or Type R	Responses)										
1. Name and Address of Reporting Person <u>*</u> CARRUTHERS MICHAEL			2. Issuer Name <b>and</b> Ticker or Trading Symbol					5. Relationship of Reporting Person(s) to Issuer			
		ARRAY BIOPHARMA INC [ARRY]					(Check all applicable)				
(Last) (First) (Middle) 3200 WALNUT STREET			<ul><li>3. Date of Earliest Transaction</li><li>(Month/Day/Year)</li><li>07/24/2013</li></ul>					Director 10% Owner X Officer (give title Other (specify below) below) CFO			
				If Amendment, Date Original iled(Month/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>			
BOULDER,	CO 80301							Person	fore than One Re	porting	
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securit	ties Acq	uired, Disposed of	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if any (Month/Day/Year)			n Date, if	Code (Instr. 3, 4 and 5)				Securities Elementicially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial	
				Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)			
Common Stock	07/24/2013			М	15,321	А	\$ 3.75	123,134 <u>(1)</u>	D		
Common Stock	07/24/2013			F	10,869	D	\$ 6.07	112,265	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.

#### Edgar Filing: ARRAY BIOPHARMA INC - Form 4

# 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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8 I S (
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (Right to Buy)	\$ 3.75	07/24/2013		М	15,321	(2)	08/01/2013	Common Stock	15,321	

## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
I O O O O O O O O O O O O O O O O O O O	Director	10% Owner	Officer	Other		
CARRUTHERS MICHAEL 3200 WALNUT STREET BOULDER, CO 80301			CFO			
Signatures						

R. Michael 07/25/2013 Carruthers <u>\*\*</u>Signature of Date

Reporting Person

### **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) Includes 1,852 shares purchased on December 31, 2012 pursuant to the Amended and Restated Array BioPharma Inc. Employee Stock Purchase Plan
- (2) The option vested in four equal annual installments beginning on July 1, 2004.

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.