## Edgar Filing: Prothena Corp plc - Form 4

Form 4 March 20, 20	••										
FORN	ЛЛ								OMB AF	PROVAL	
	UNITED	STATES					NGE C	OMMISSION	OMB	3235-0287	
Subject to Section 16. Form 4 or			Washington, D.C. 20549 F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Section 16(a) of the Securities Exchange Act of 1934,						Number: January 31 Expires: 2005 Estimated average burden hours per response 0.5		
obligatio may com <i>See</i> Instr 1(b).	ns Section 17( inue. uction	a) of the l	Public U		ding Con	npany	Act of	1935 or Section	I		
(Print or Type l	Responses)										
Nickerson Tara Symbol				er Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer			
				of Earliest Transaction				(Check all applicable)			
C/O PROTI INC, 650 G BOULEVA		NCES	(Month/I 03/20/2	Day/Year) 015				Director X Officer (give below) Chief E			
Filed(Mor				endment, Date Original nth/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>			
SOUTH SA FRANCISC	AN CO, CA 94080							Person		porting	
(City)		(Zip)	Tah	le I - Non-F	)erivative (	Secur	ities Aca	uired, Disposed of,	or Beneficial	v Owned	
1.Title of Security (Instr. 3)		on Date 2A. Deemed /Year) Execution Date, if any (Month/Day/Year)			4. Securit on(A) or Dis (Instr. 3, 4	ies Ac sposed 4 and 5 (A)	quired of (D)	Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Ordinary Shares, par value \$0.01 per share	03/20/2015			М	13,000	A	\$ 6.41	15,000	D		
Ordinary Shares, par value \$0.01 per share	03/20/2015			S <u>(1)</u>	13,000	D	\$ 39.99	2,000	D		

## Edgar Filing: Prothena Corp plc - Form 4

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number of tiorDerivative 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)	\$ 6.41	03/20/2015		М		13,000	<u>(2)</u>	01/29/2023	Ordinary Shares	13,000	
Reporting Owners											

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Nickerson Tara C/O PROTHENA BIOSCIENCES INC 650 GATEWAY BOULEVARD SOUTH SAN FRANCISCO, CA 94080			Chief Business Officer					
Signatures								
/s/ A.W. Homan, as Attorney in Fact for Nickerson	Tara		03/20/2015					
**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) The sale reported in the Form 4 was effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person.

The shares subject to the option will vest and become exercisable as to 25% of the total number of shares subject to the option on January
 (2) 29, 2014 and with respect to 1/48th of the total number of shares subject to the option in successive, equal monthly installments on each monthly anniversary thereafter, subject to the Reporting Person's continued employment with the Issuer on each such vesting date.

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.

8 D S (]