#### **DUGGAN ROBERT W**

Form 4

December 11, 2018

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

**OMB APPROVAL** 

**OMB** Number:

3235-0287

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Check this box

**SECURITIES** 

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

Form 5 obligations may continue.

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

See Instruction

(Middle)

1(b).

(Last)

(Print or Type Responses)

1. Name and Address of Reporting Person \* **DUGGAN ROBERT W** 

(First)

2. Issuer Name and Ticker or Trading Symbol

Achaogen, Inc. [AKAO]

3. Date of Earliest Transaction

(Month/Day/Year) 12/07/2018

5. Relationship of Reporting Person(s) to

Issuer

(Check all applicable)

\_X\_\_ 10% Owner

611 SOUTH FORT HARRISON **AVE, SUITE 306** 

> 4. If Amendment, Date Original (Street)

> > Filed(Month/Day/Year)

Officer (give title \_ Other (specify below)

6. Individual or Joint/Group Filing(Check Applicable Line)

Director

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

CLEARWATER, FL 33756

(City)	(State)	(Zip) Tabl	e I - Non-l	Derivative :	Secur	ities Acqui	red, Disposed of,	or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactic Code (Instr. 8)	4. Securities Acquired (A) on Disposed of (D) (Instr. 3, 4 and 5)  (A) or Amount (D) Price		5. Amount of 6. Securities Ownership Beneficially Form: Owned Direct (D) Following or Indirect Reported (I) Transaction(s) (Instr. 4) (Instr. 3 and 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock, par value \$0.001 per share	12/07/2018		P	22,431			8,443,961	D	
Common Stock, par value \$0.001 per share							30,000	I	See Footnote (1)
Common Stock, par							100,255	I	See Footnote

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 value
 (2)

 \$0.001 per
 (2)

 share
 (2)

 Common
 (3)

 Stock, par
 (3)

 value
 (3)

 share
 (3)

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.

SEC 1474

(9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)			5. onNumber	6. Date Exer Expiration D	ate	7. Title Amou	nt of	8. Price of Derivative	9. Nu Deriv
Security	or Exercise		any	Code	of	(Month/Day/	(Year)	Under	lying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ties	(Instr. 5)	Bene
	Derivative				Securities	}		(Instr.	3 and 4)		Own
	Security				Acquired						Follo
	·				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						(111511
					4, and 5)						
					4, and 3)						
									Amount		
						D.	Б		or		
						Date Exercisable	Expiration Date	Title Numb	Number		
									of		
				Code V	(A) (D)				Shares		

# **Reporting Owners**

Duggan

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
DUGGAN ROBERT W 611 SOUTH FORT HARRISON AVE SUITE 306 CLEARWATER, FL 33756		X				
Signatures						
Robert W. Duggan, By: /s/ Robert W.		12/11/201	10			

\*\*Signature of Reporting Person Date

Reporting Owners 2

12/11/2018

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## **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) Shares held by Blaze-On Corporation, of which the Reporting Person is the sole officer and director.
- (2) Shares held by Robert W. Duggan Foundation, of which the Reporting Person is the President.
- (3) Shares are held by Genius Inc., of which the Reporting Person is the sole shareholder.

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.