Edgar Filing: Powell Andrew Kenneth William - Form 4

Powell Andrew Kenneth William Form 4 January 10, 2011

FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB APPROVAL Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES OMB APPROVAL OMB 3235-0287 Statement of Changes in Beneficial Ownership Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). Statement of Changes in Beneficial Ownership 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 OMB APPROVAL								
(Print or Type Responses)								
1. Name and Address of Reporting Person Powell Andrew Kenneth William	 2. Issuer Name and Ticker or Trading Symbol CORNERSTONE THERAPEUTICS INC [CRTX] 	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
(Last) (First) (Middle) C/O CORNERSTONE THERAPEUTICS, 1255 CRESCENT GREEN DRIVE, SUITE 250	3. Date of Earliest Transaction (Month/Day/Year) 01/07/2011	Director 10% Owner XOfficer (give title Other (specify below) EVP, General Counsel						
(Street)	(Street) 4. If Amendment, Date Original Filed(Month/Day/Year)							
CARY, NC 27518		Form filed by More than One Reporting Person						
(City) (State) (Zip)	Table I - Non-Derivative Securities Acc	uired, Disposed of, or Beneficially Owned						
(Instr. 3) any	Deemed 3. 4. Securities Acquired cution Date, if Transaction(A) or Disposed of Code (D) onth/Day/Year) (Instr. 8) (Instr. 3, 4 and 5) (A) or Code V Amount (D) Price	5. Amount of Securities6. Ownership Form: Direct7. Nature of IndirectBeneficially Owned(D) or Indirect (I)Beneficial OwnershipFollowing Reported Transaction(s) (Instr. 3 and 4)(Instr. 4)						
01/07/2011 Stock	S (1) D (2) D (2) D (2)	102,100 D						

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

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 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)	4. Transactio Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address		Relationships						
ForBoo (1999)		Director	10% Owner	Officer	Other			
Powell Andrew Kenneth William C/O CORNERSTONE THERAPEUTICS 1255 CRESCENT GREEN DRIVE, SUITE 250 CARY, NC 27518				EVP, General Counsel				
Signatures								
/s/ Andrew K. W. 0 Powell)1/10/2010							

<u>**</u>Signature of Reporting Person

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

Date

- ** 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 sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on August 19, 2010.

The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$5.70 to \$5.75, inclusive. The reporting person undertakes to provide to Cornerstone Therapeutics Inc., any security holder of Cornerstone

(2) Therapeutics Inc., or the staff of the U.S. Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote to this Form 4.

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.