## Edgar Filing: Lappe Mark - Form 4

Lappe Mark Form 4												
October 30, 2	.008											
									OMB A	PPROVAL		
	FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287		
Check this if no long subject to Section 16 Form 4 or Form 5	er <b>STATEN</b> 5.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES										
obligation may conti <i>See</i> Instru- 1(b).	s Section 170	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										
(Print or Type R	esponses)											
1. Name and Address of Reporting Person <u>*</u> Lappe Mark			2. Issuer Name <b>and</b> Ticker or Trading Symbol REPROS THERAPEUTICS INC.					5. Relationship of Reporting Person(s) to Issuer				
		[RPRX]					(Check all applicable)					
(			(Month/D	3. Date of Earliest Transaction (Month/Day/Year)				X DirectorX 10% Owner Officer (give title Other (specify below)				
11022 EL CA 100	AMINO KEAL,	SUILE	10/28/20	008								
	(Street)	ndment, Date Original nth/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ul>						
SAN DIEGO	), CA 92130							Form filed by M Person	Iore than One Re	porting		
(City)	(State)	(Zip)	Table	e I - Non-D	erivative	Securi	ties Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)	med on Date, if Day/Year)	3. Transactic Code (Instr. 8)	4. Securit on(A) or Di (Instr. 3,	sposed	of (D)	Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)				
				Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				
Common Stock	10/28/2008			Р	9,892	А	\$ 6.87	4,256,436	Ι	Efficacy Capital (1)		
Common Stock	10/29/2008			Р	24,400	А	\$ 6.97	4,280,836	Ι	Efficacy Capital (2)		

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. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Unde Secur	unt of 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							
Reporting Owner Rune / Runess	Director	10% Owner	Officer	Other				
Lappe Mark 11622 EL CAMINO REAL SUITE 100 SAN DIEGO, CA 92130	Х	Х						
Signatures								
/s/ Louis Ploth, Jr./Attorney-in-Fact		10/30/2008						
**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).

The shares are held by investment funds. Includes 3,934,536 shares held by Efficacy Biotech Master Fund, Ltd., a Bermuda Exempted
 Mutual Fund Company and 321,900 shares held by FMG Special Opportunity Fund. The Reporting Person acts as investment advisor with investment and voting discretion over portfolio investments. The Reporting Person is an indirect owner of the reported securities.

The shares are held by investment funds. Includes 3,958,936 shares held by Efficacy Biotech Master Fund, Ltd., a Bermuda Exempted
 Mutual Fund Company and 321,900 shares held by FMG Special Opportunity Fund. The Reporting Person acts as investment advisor with investment and voting discretion over portfolio investments. The Reporting Person is an indirect owner of the reported securities.

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.