FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APP	ROVAL
OMB Number:	3235-028
Estimated average b	ourden

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OWD 74 TITE	/ V/ (L						
OMB Number: 3235-0287							
Estimated average burden							
hours per response:	0.5						

Name and Address of Reporting Person* Ruff Shamim (Last) (First) (Middle) 215 FIRST STREET						Issuer Name and Ticker or Trading Symbol Sarepta Therapeutics, Inc. [SRPT] 3. Date of Earliest Transaction (Month/Day/Year) 11/08/2016										ationship of Reporting Pe k all applicable) Director Officer (give title below) SVP, Regulatory A			10% Ov Other (s below)	vner specify
SUITE 4 (Street) CAMBR		A	02142		4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)									Indiv ne) X	ridual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(S	tate)	(Zip)																	
		Tab	le I - Noi	n-Deriv	ative	e Se	curit	ies Ad	cqu	ıired, I	Dis	posed o	of, or Be	eneficia	lly (Owned	l			
Date			2. Trans Date (Month/I		ar)	2A. Deemed Execution Date, if any (Month/Day/Year		•,	Transaction Dispose Code (Instr. 5)		Dispose	ties Acqui d Of (D) (In		4 and Secu Bene Own		ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
										Code	v	Amount	(A) o (D)	r Price		Reporte Transac (Instr. 3	tion(s)			(111341. 4)
Common	Common Stock 11/0			11/08	3/2016	/2016				М		1,000	1,000 A \$.24	21,	21,239(1)		D	
		7	able II -									sed of onverti				wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution Date, Transaction of			ivative urities uired or oosed O) tr. 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)						8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ow For Dire or I (I) (10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Dai	ite ercisable		xpiration ate	Title	Amount or Number of Shares						
Incentive Stock Option (right to	\$26.24	11/08/2016			М			1,000		(2)	0	1/02/2023	Common Stock	1,000		\$0.00	12,097	,	D	

Explanation of Responses:

1. Includes 15,300 Restricted Stock Award ("RSA") that will vest upon the Company exceeding \$80 million in total revenue reported in publicly released GAAP financials, in any fiscal quarter between grant date and June 30, 2018, and an additional 3,825 RSAs that will vest during the same period if the total revenue reported in the publicly released GAAP financials exceeds \$100 million.

2. 25% of the option became exercisable on the first anniversary of the date of hire (01/02/2013) and 1/48th of the total granted option becomes exercisable on each monthly anniversary thereafter, such that the option will be fully exercisable on the fourth anniversary of the date of hire.

Remarks:

/s/David Tyronne Howton, as 11/10/2016 Attorney-in-Fact for Shamim Ruff

** Signature of Reporting Person Date

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

- * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.