FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington D.C. 20549

Wasi	nington,	D.C.	20549	

	OMB APPRO
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:

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

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average b	ourden							
hours per response:	0.5							

1. Name and Address of Reporting Person* BEHRENS M KATHLEEN				2. Issuer Name and Ticker or Trading Symbol Sarepta Therapeutics, Inc. [SRPT]								Check	all applic	hip of Reporting Person(s) to Iss pplicable)						
													X Direct		or 10% C		10% Ov	vner		
(Last)	`	,	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 10/31/2018									Officer (give title Other below) below				specify	
215 FIRST STREET, SUITE 415																				
(Street)					_ 4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Application)				·		
CAMBR	IDGE M	A	02142											X	Form filed by One Reporting Person					
,					-										Form filed by More than One Reporting Person				rting	
(City)	(S	tate)	(Zip)																	
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
Date			2. Transac Date (Month/Da		Execution Execution				ction Instr.	4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 ar			Beneficia Owned Fo		es Formally (D) of the collowing of the collowing in the		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price				Reporte Transac (Instr. 3		(Instr. 4)	
Common Stock 10/3			10/31/	2018	018			M		10,000	A	\$3.9	6	126	5,534		D			
Common Stock 10/31/2			2018)18		S		10,000	D	\$131.	⁷ 1 ⁽¹⁾	116,534		D						
Common Stock													21,	,855		I	By Trust			
		-	Table II								posed of,				wned					
				(e.g.,	puts,	calls	, Wa	arrants	s, opti	ons,	converti	ole secu	ırıtıes)						
1. Title of Derivative Security (Instr. 3)	vative Conversion Date Execution Date, Tran crity or Exercise (Month/Day/Year) if any Code			Transa Code (5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amoun of Securities Underlying Derivative Security (Instr. 3 and 4)		D	Price of erivative ecurity 1str. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amour or Number of Shares	er						
Stock Option (right to	\$3.96	10/31/2018			M			10,000	(2)		03/31/2019	Common Stock	10,00	0	\$0.00	0		D		

Explanation of Responses:

1. The price reported in Column 4 is a weighted average price. The shares were sold in multiple transactions at prices ranging from \$131.53 to \$131.94, inclusive. The reporting person undertakes to provide to Sarepta Therapeutics, Inc., any security holder of Sarepta Therapeutics, Inc. or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price with the range set forth herein.

2. The option to purchase shares is fully vested.

Remarks:

/s/ David Tyronne Howton, as

attorney-in-fact for M.

Kathleen Behrens

11/02/2018

Date

** Signature of Reporting Person 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.