FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| 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

OMB APPROVAL

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| | | | | | _ | | | | | | | | | | | | |
|---|---|--|--|--|---|---|--------------|-----------|---|-----------------|-----------------|---|---|--|---|---------------------------------------|--|
| 1. Name and Address of Reporting Person* <u>Aphale Jayant</u> | | | | | | 2. Issuer Name and Ticker or Trading Symbol Sarepta Therapeutics, Inc. [SRPT] | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner | | | | |
| (Last) 215 FIRS | st) (First) (Middle) 5 FIRST STREET, SUITE 7 | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/28/2014 | | | | | | | | X Officer (give title Other (specify below) SVP Technical Operations | | | | |
| (Street) CAMBRIDGE MA 02142 | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | Lin | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting | | | | | |
| (City) (State) (Zip) | | | | | | | | | | | Person | | | | | | |
| | | Tak | ole I - Non- | -Deriva | ative | Sec | curities | s Ac | quired, D | isposed (| of, or Be | neficial | ly Owned | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | | ar) E | 2A. Deemed Execution Date, f any (Month/Day/Yea | | Code (Ins | | | | Beneficia Owned F | s For ally (D) following (I) (| m: Direct | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | Code V | Amount | (A) oi (D) | Price | Reported Transact (Instr. 3 a | ion(s) | | (Instr. 4) | |
| | | - | Table II - D | | | | | | uired, Dis | | | | Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Da if any (Month/Day/N | ate, Tr | 4. Transac Code (Ir | | 5. Number of | | 6. Date Exer Expiration D (Month/Day/ | cisable and | | | 8. Price of Derivative Security | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4 | Beneficial Ownership (Instr. 4) | |
| | | | | Co | ode | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | | |
| Incentive Stock Option (right to buy) | \$29.03 | 02/28/2014 | | | A | | 1,459 | | (1) | 02/28/2024 | Common Stock | 1,459 | \$0.0 | 1,459 | D | | |
| Non- Qualified Stock Option (right to | \$29.03 | 02/28/2014 | | | A | | 33,541 | | (1) | 02/28/2024 | Common Stock | 33,541 | \$0.0 | 33,541 | D | | |

Explanation of Responses:

1. This option is exercisable at the rate of 25% of the shares on the first anniversary of the date of grant and 1/48th of the total granted shares on each monthly anniversary thereafter, such that the option will be fully exercisable on the fourth anniversary of the date of grant.

By: /s/David Tyronne Howton For: Jayant Aphale 03/04/2014

** Signature of Reporting Person

Signature of Reporting Ferso

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.