

# SECURITIES AND EXCHANGE COMMISSION

## FORM 3

Filing Date: **2013-03-19** | Period of Report: **2013-03-19**  
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### REPORTING OWNER

#### **BOHLIN GAREN G**

CIK: **1254705**

Type: **3** | Act: **34** | File No.: **001-35837** | Film No.: **13703384**

Mailing Address  
C/O PRAECIS  
PHARMACEUTICALS INC  
830 WINTER STREET  
WALTHAM MA 02451

### ISSUER

#### **TETRAPHASE PHARMACEUTICALS INC**

CIK: **1373707** | IRS No.: **000000000** | State of Incorporation: **DE** | Fiscal Year End: **1231**  
SIC: **2834** Pharmaceutical preparations

Mailing Address  
480 ARSENAL STREET  
SUITE 110  
WATERTOWN MA 02472

Business Address  
480 ARSENAL STREET  
SUITE 110  
WATERTOWN MA 02472  
617.715.3600

**FORM 3**

**UNITED STATES SECURITIES AND  
EXCHANGE COMMISSION**  
Washington, D.C. 20549

OMB APPROVAL	
OMB Number:	3235-0104
Expires:	02/28/2011
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**INITIAL STATEMENT OF BENEFICIAL  
OWNERSHIP OF SECURITIES**

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

1. Name and Address of Reporting Person <u>BOHLIN GAREN G</u> (Last) (First) (Middle) 480 ARSENAL ST. SUITE 110 (Street) WATERTOWN, MA 02472 (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) 03/19/2013	3. Issuer Name and Ticker or Trading Symbol <u>TETRAPHASE PHARMACEUTICALS INC [TTPH]</u>	
		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input type="checkbox"/> Officer (give title below) <input type="checkbox"/> Other (specify below)	5. If Amendment, Date Original Filed (Month/Day/Year)
		6. Individual or Joint/Group Filing (Check applicable line) <input checked="" type="checkbox"/> Form Filed by One Reporting Person <input type="checkbox"/> Form Filed by More than One Reporting Person	

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)

**Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			
Non-qualified Stock Option (right to buy)	(1)	07/11/2020	Common Stock	32,565 (2)	\$2.03 (2)	D	

**Explanation of Responses:**

- Original grant of 32,565 shares. Vested as to 20,353 shares, with further vesting as to an additional 6.25% of the original grant on 4/12/2013 and at the end of each successive three-month period until 7/12/2014.
- Reflects a one-for-twenty-nine reverse stock split effected on March 5, 2013.

**Signatures**

/s/ Garen Bohlin

\*\* Signature of Reporting Person

03/19/2013

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.**