FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

	OMB APPROVAL							
	OMB Number: 3235-028							
l	Estimated average burde	en						
	hours per response:	0.5						

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

1. Name and Address of Reporting Person* <u>Lindemann Katharine</u>				2. Issuer Name and Ticker or Trading Symbol Flex Pharma, Inc. [FLKS]					(Ch	eck all applic	cable)	ng Person(s) to Is 10% C Other (wner		
(Last) (First) (Middle) C/O FLEX PHARMA, INC. 800 BOYLSTON STREET				3. Date of Earliest Transaction (Month/Day/Year) 01/18/2017							helow)		ating (below)	Secury	
(Street) BOSTON MA 02199 (City) (State) (Zip)				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)					Line	Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned															
Date			Fransactior te onth/Day/Yo	Execution Date,		Code (Ins	Transaction Disposed Of (D) (Instr. 3, 4 Code (Instr. 5)			Benefici	es ally Following	6. Own Form: I (D) or I (I) (Inst	Direct Cludirect Etr. 4)	7. Nature of Indirect Beneficial Ownership		
								Code V	Amount	(A) or (D)	Price	Transact (Instr. 3	tion(s)			Instr. 4)
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)															
Derivative Conversion Date Execution Date, To Courtie or Exercise (Month/Day/Year) if any		Code (ansaction of ode (Instr. Derivative		Expiration Date (Month/Day/Year)		7. Title and Amour of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y [10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)			
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					
Stock Option (right to buy)	\$4.58	01/18/2017		A		77,000		(1)	01/18/2027	Common Stock	77,000	\$0	77,000		D	

Explanation of Responses:

1. The stock option will vest in 48 successive equal monthly installments measured from January 18, 2017.

Remarks:

/s/ Robert Hadfield, Attorney-

01/20/2017

in-Fact

** 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.