

OMB APPROVAL	
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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

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>Shacham Sharon</u> (Last) (First) (Middle) C/O KARYOPHARM THERAPEUTICS INC. 85 WELLS AVENUE (Street) NEWTON MA 02459 (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>Karyopharm Therapeutics Inc. [KPTI]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner <input checked="" type="checkbox"/> Officer (give title below) Other (specify below) President & CSO
	3. Date of Earliest Transaction (Month/Day/Year) 02/15/2020	
4. If Amendment, Date of Original Filed (Month/Day/Year)		

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Common Stock	02/15/2020		M		21,800	A	(1)	765,306	D	
Common Stock	02/15/2020		M		21,800	A	(1)	563,939	I	By Spouse

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		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 Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	V	(A)	(D)	Date Exercisable	Expiration Date						Title
Restricted Stock Units	(1)	02/15/2020		M			21,800	(2)	(2)	Common Stock	21,800	\$0.00	65,400	D	
Restricted Stock Units	(1)	02/15/2020		M			21,800	(3)	(3)	Common Stock	21,800	\$0.00	65,400	I	By Spouse

Explanation of Responses:

- Restricted stock units convert into Karyopharm Therapeutics Inc. common stock on a one-for-one basis.
- On February 15, 2019, the reporting person was granted 87,200 restricted stock units, vesting in four equal annual installments beginning on the first anniversary of the grant date. 25% of the restricted stock units vested on February 15, 2020. Vested shares will be delivered to the reporting person as soon as practicable following the vesting date, but in any an event within 30 days of such date.
- On February 15, 2019, the spouse of the reporting person was granted 87,200 restricted stock units, vesting in four equal annual installments beginning on the first anniversary of the grant date. 25% of the restricted stock units vested on February 15, 2020. Vested shares will be delivered to the spouse of the reporting person as soon as practicable following the vesting date, but in any an event within 30 days of such date.

Remarks:

/s/Christopher B. Primiano,
Attorney-in-Fact for Sharon 02/19/2020
Shacham

** 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.