

Duarte Ira  
Form 3  
April 08, 2010

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

OMB Number: 3235-0104  
Expires: January 31, 2005  
Estimated average burden hours per response... 0.5

**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

(Print or Type Responses)

|  |  |                                      |  |  |
|--|--|--------------------------------------|--|--|
| 1. Name and Address of Reporting Person *                            |  | 2. Date of Event Requiring Statement | 3. Issuer Name <b>and</b> Ticker or Trading Symbol                     |  |
| Â Duarte Ira   |  | (Month/Day/Year)                     | CORNERSTONE THERAPEUTICS INC [CRTX]                                    |  |
| (Last)   | (First)  | (Middle)                             | 04/01/2010   |  |
| C/O CORNERSTONE THERAPEUTICS, Â 1255 CRESCENT GREEN DRIVE, SUITE 250 |  |                                      | 4. Relationship of Reporting Person(s) to Issuer                       | 5. If Amendment, Date Original Filed(Month/Day/Year) |
| (Street)   | (Check all applicable)                                     |                                      |  |  |
|  | <input type="checkbox"/> Director                          | <input type="checkbox"/> 10% Owner   |  |  |
|  | <input checked="" type="checkbox"/> Officer                | <input type="checkbox"/> Other       |  |  |
|  | (give title below) (specify below)                         |                                      |  |  |
|  | Principal Accounting Officer                               |                                      |  |  |
| CARY, Â NC Â 27518   | 6. Individual or Joint/Group Filing(Check Applicable Line) |                                      |  |  |
| (City)   | (State)  | (Zip)                                | <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) |
|---------------------------------|---|--|---|
|---------------------------------|---|--|---|

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

SEC 1473 (7-02)

**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 control number.**

**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 | 5. Ownership Form of Derivative Security: | 6. Nature of Indirect Beneficial Ownership (Instr. 5) |
|--|--|---|---|---|---|
|--|--|---|---|---|---|

## Edgar Filing: Duarte Ira - Form 3

|  | Date Exercisable | Expiration Date | Title        | Amount or Number of Shares | Security | Direct (D) or Indirect (I) (Instr. 5) |   |
|--|------------------|-----------------|--------------|----------------------------|----------|---------------------------------------|---|
| Option to Purchase Common Stock (Right to Buy) | Â (1)            | 05/31/2019      | Common Stock | 20,000                     | \$ 7.28  | D                                     | Â |
| Option to Purchase Common Stock (Right to Buy) | Â (2)            | 03/02/2020      | Common Stock | 8,000                      | \$ 5.26  | D                                     | Â |

## Reporting Owners

### Reporting Owner Name / Address

### Relationships

Director    10% Owner    Officer    Other

|  |   |   |   |                              |   |
|--|---|---|---|------------------------------|---|
| Duarte Ira<br>C/O CORNERSTONE THERAPEUTICS<br>1255 CRESCENT GREEN DRIVE, SUITE 250<br>CARY, NC 27518 | Â | Â | Â | Principal Accounting Officer | Â |
|--|---|---|---|------------------------------|---|

## Signatures

/s/ Ira Duarte                      04/08/2010

\*\*Signature of  
Reporting Person

Date

## Explanation of Responses:

- \* If the form is filed by more than one reporting person, *see* Instruction 5(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).
- (1) This option vests as to 25% of the original number of shares on June 1, 2010 and as to another 2.09% of the original number of shares at the end of each successive one-month period following June 1, 2010 until June 1, 2013.
- (2) This option vests as to 25% of the original number of shares on March 3, 2011 and as to another 2.09% of the original number of shares at the end of each successive one-month period following March 3, 2011 until March 3, 2014.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.