

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL

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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>THOMPSON PHILLANDAS T.</u> (Last) (First) (Middle) <u>C/O FLAMEL TECHNOLOGIES S.A.</u> <u>33 AVENUE DU DR. GEORGES LEVY</u> (Street) <u>VENISSIEUX IO</u> <u>69200</u> (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) <u>01/01/2016</u>	3. Issuer Name and Ticker or Trading Symbol <u>FLAMEL TECHNOLOGIES SA [FLML]</u> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> 4. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input type="checkbox"/> Director <input checked="" type="checkbox"/> Officer (give title below) <div style="text-align: center;"><u>See Remarks</u></div> </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> 10% Owner <input type="checkbox"/> Other (specify below) </td> </tr> </table>	4. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input type="checkbox"/> Director <input checked="" type="checkbox"/> Officer (give title below) <div style="text-align: center;"><u>See Remarks</u></div>	<input type="checkbox"/> 10% Owner <input type="checkbox"/> Other (specify below)
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		5. If Amendment, Date of 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)
<u>ADSs⁽¹⁾</u>	<u>10,000⁽²⁾</u>	<u>D</u>	

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: 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			
<u>Stock Option (right to buy)</u>	<u>(3)</u>	<u>12/12/2023</u>	<u>ADSs</u>	<u>100,000</u>	<u>7.36</u>	<u>D</u>	
<u>Stock Option (right to buy)</u>	<u>(4)</u>	<u>12/11/2024</u>	<u>ADSs</u>	<u>95,000</u>	<u>16.3</u>	<u>D</u>	
<u>Stock Option (right to buy)</u>	<u>(5)</u>	<u>12/10/2025</u>	<u>ADSs</u>	<u>100,000</u>	<u>14.35</u>	<u>D</u>	

Explanation of Responses:

1. ADSs" are American Depositary Shares, with each ADS representing one ordinary share, nominal value 0.122 Euros per share, of the issuer; ADSs are represented by American Depositary Receipts.
2. Restricted ADSs granted under the issuer's "Free Shares" award program on 12/11/2014. All of such 10,000 restricted ADSs will vest and be issued to the reporting person on the fourth anniversary of the grant date, provided that the reporting person continues to be employed by the issuer or an affiliate thereof on that date.
3. Options become exercisable as to 25,000 ADSs on each of the first four anniversaries after the 12/12/2013 grant date.
4. Options become exercisable as to 23,750 ADSs on each of the first four anniversaries after the 12/11/2014 grant date.
5. Options become exercisable as to 25,000 ADSs on each of the first four anniversaries after the 12/10/2015 grant date.

Remarks:

Sr. VP, General Counsel and Corporate Secretary

/s/ Phillandas T. Thompson 01/04/2016

** 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 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).

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.