FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0287

Expires: December 31, 2014

Estimated average burden hours per 0.5

response:

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*  Buckley Stephen Jr.  |   |  |                        |   |   | Issuer Name and Ticker or Trading Symbol     Tokai Pharmaceuticals Inc [ TKAI ]      Date of Earliest Transaction (Month/Day/Year) |        |     |  |                 |  |   |                                      |   | tionship<br>all appl<br>Directo   | ,  |                             | rson(s) to Is  |                         |
|--|---|--|------------------------|---|---|--|--------|-----|--|-----------------|--|---|--------------------------------------|---|---|--|-----------------------------|--|-------------------------|
| (Last)   | (Fi   | rst) (                                     |                        | 3. Date of Earliest Transaction (Month/Day/Year) 06/17/2015 |   |  |        |     |  |                 |  |   | Officer (give title below)           |   |   | Other (s   | specify                     |  |                         |
| C/O TOKAI PHARMACEUTICALS, INC.<br>255 STATE STREET, 6TH FLOOR   |   |  |                        |   |   | 4. If Amendment, Date of Original Filed (Month/Day/Year)   |        |     |  |                 |  |   |                                      | 6. Individual or Joint/Group Filing (Check Applicable Line) |   |  |                             |  |                         |
| (Street) BOSTON MA 02109   |   |  |                        |   |   |  |        |     |  |                 |  |   |                                      | X   | X Form filed by One Reporting Person Form filed by More than One Reporting Person |  |                             |  |                         |
| (City)   | (St   | ate) (Zip)                                 |                        |   |   |  |        |     |  |                 |  |   |                                      |   |   |  |                             |  |                         |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned   |   |  |                        |   |   |  |        |     |  |                 |  |   |                                      |   |   |  |                             |  |                         |
| 1. Title of Security (Instr. 3)  2. Transact Date (Month/Day   |   |  |                        |   |   | Execution Date,  |        |     | Transaction Dispos<br>Code (Instr. and 5)                      |                 | rities Acquired (A) ed Of (D) (Instr. 3, 4 |   |                                      | 5. Amo<br>Securit<br>Benefic<br>Owned                       | ties For<br>cially (D)  |  | n: Direct<br>or<br>rect (I) | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership                  |                         |
|  |   |  |                        |   |   |  |        |     | Code   | v               | Amoun                                      | mount (A) or (D)  |                                      | e   | Following (In Reported Transaction(s) (Instr. 3 and 4)                            |  | (Inst                       | (r. 4)   | (Instr. 4)              |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |   |  |                        |   |   |  |        |     |  |                 |  |   |                                      |   |   |  |                             |  |                         |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)  | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | Execution Date, if any |   | 4.<br>Transaction<br>Code (Instr.<br>8) |  | n of   |     | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                 |  | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Instr. 3<br>and 4) |                                      | of<br>Der<br>Sec  | Price<br>rivative<br>curity<br>str. 5)  | 9. Number<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction<br>(Instr. 4) | y                           | Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr.<br>4) | Beneficial<br>Ownership |
|  |   |  |                        |   | Code                                    | v  | (A)    | (D) | Date<br>Exercisable  | Ex <sub> </sub> | piration<br>te                             | Title   | Amoun<br>or<br>Numbe<br>of<br>Shares |   |   |  |                             |  |                         |
| Stock<br>Option<br>(right to<br>buy)   | \$14.04   | 06/17/2015                                 |                        |   | A                                       |  | 12,000 |     | (1)  | 06/             | /16/2025                                   | Common<br>Stock   | 12,000                               | \$  | 60.00   | 12,000   |                             | D  |                         |

## Explanation of Responses:

1. This option vests with respect to 100% of the shares underlying the option on June 17, 2016 subject to his continued service on Tokais Board of Directors.

## Remarks:

/s/ Cindy Driscoll, Attorneyin-Fact

06/19/2015

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.