

TREVENA INC
Street Address 1

KING OF PRUSSIA

1018 WEST 8TH AVENUE, SUITE A

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C.

OMB APPROVAL
OMB Number: 3235-0076
Expires: August 31, 2015
Estimated Average burden hours
per response: 4.0

Phone No. of Issuer

610-354-8840

0001429560	Previous Name(s) None Parallex Therapeutics, Inc.	Entity Type
	raranex Therapeutics, Inc.	Corporation
ame of Issuer		C Limited Partnership
TREVENA INC		C Limited Liability Company
urisdiction of acorporation/Organization		C General Partnership
DELAWARE		C Business Trust
ear of Incorporation/Organiz	zation	C Other
Over Five Years Ago		
Within Last Five Years (Specify Year)	2007	
Yet to Be Formed		

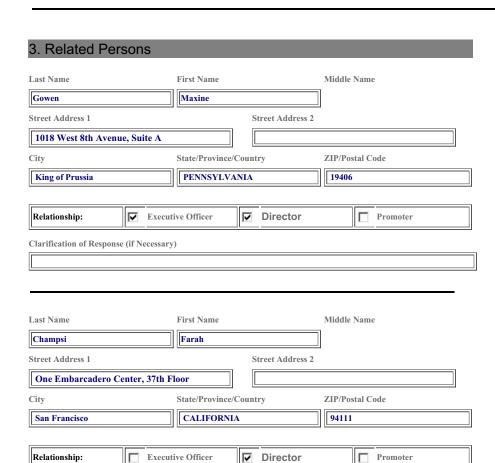
Street Address 2

State/Province/Country

PENNSYLVANIA

ZIP/Postal Code

19406



Clarification of Response (if	Necessary)			
	71			
ast Name	First Name		Middle Name	
Garland	Robert		<u></u>	
Street Address 1		Street Address 2	2	
1119 St. Paul Street				
City	State/Province		ZIP/Postal Code	
Baltimore	MARYLANI	<u> </u>	21202	
Relationship:	Executive Officer	Director	Promoter	
Clarification of Response (if	Necessary)			
Last Name	First Name		Middle Name	
McGuire	Terence			
treet Address 1		Street Address 2	2	
1000 Winter Street, Suit	e 3350			$\overline{}$
City	State/Province	/Country	ZIP/Postal Code	
Waltham	MASSACHU		02451	
Relationship:	Executive Officer	☑ Director	Promoter	
Clarification of Response (if	Nacassan			
Last Name	First Name		Middle Name	
Mirabelli	Christopher			
Street Address 1		Street Address 2	2	
44 Nassau Street				
City	State/Province	/Country	ZIP/Postal Code	
Princeton	NEW JERSE	ΣΥ	08542	
Relationship:	Executive Officer	Director	Promoter	
Clarification of Response (if	Necessary)			
Last Name	First Name		Middle Name	
Ruffolo	Robert, Jr.			
Street Address 1		Street Address 2	<u> </u>	
	Suito A	Su cet Address 2		_
1018 West 8th Avenue, 8				
City	State/Province		ZIP/Postal Code	
King of Prussia	PENNSYLV	ANIA	19406	
Relationship:	Executive Officer	☑ Director	Promoter	
Clarification of Response (if	Necessary)			

Last Name F	irst Name	Middle Name
Snyderman	Ralph	
Street Address 1	Street Address 2	
Box 3701 DUMC		
City	tate/Province/Country	ZIP/Postal Code
Durham	NORTH CAROLINA	27710
Relationship: Executiv	e Officer Director	Promoter
Clarification of Response (if Necessary)		
4 landonatur Onno		
4. Industry Group	Health Care	-
C Agriculture	C Biotechnology	C Retailing
Banking & Financial Services	C Health Insurance	C Restaurants
C Commercial Banking	C Hospitals & Physicians	Technology
C Insurance	Pharmaceuticals	C Computers
C Investing C Investment Banking	Other Health Care	C Telecommunications
Pooled Investment Fund		C Other Technology
Other Banking & Financial		Travel
C Services	C Manufacturing	C Airlines & Airports
C Business Services	Real Estate	C Lodging & Conventions
Energy	C Commercial	C Tourism & Travel Services
C Coal Mining	Construction	C Other Travel
C Electric Utilities C Energy Conservation	C REITS & Finance C Residential	O Other
C Environmental Services	Other Real Estate	
C Oil & Gas		
C Other Energy		
5. Issuer Size		
Revenue Range	Aggregate Net Ass	set Value Range
No Revenues	C No Aggreg	gate Net Asset Value
\$1 - \$1,000,000	C \$1 - \$5,000	0,000
\$1,000,001 - \$5,000,000	C \$5,000,001	1 - \$25,000,000
\$5,000,001 - \$25,000,000	C \$25,000,00	01 - \$50,000,000
\$25,000,001 - \$100,000,000	C \$50,000,00	01 - \$100,000,000
Over \$100,000,000	C Over \$100	0,000,000
• Decline to Disclose	C Decline to	Disclose
C Not Applicable	C Not Appli	cable
6. Federal Exemption(s	and Exclusion(s) Cla	imed (select all that
o. i caciai Exciliption(s	and Exolusion(s) Ola	iiiiiod (ooloot all triat
apply)		
Rule 504(b)(1) (not (i), (ii)	□ Rule 505	
Rule 504(b)(1) (not (i), (ii) or (iii))	Rule 505	
Rule 504(b)(1) (not (i), (ii) or (iii)) Rule 504 (b)(1)(i)	Rule 506(b)	
Rule 504(b)(1) (not (i), (ii) or (iii))		
Rule 504(b)(1) (not (i), (ii) or (iii)) Rule 504 (b)(1)(i)	Rule 506(b)	(5)

7. Type of Filing
New Notice Date of First Sale 2010-07-08 First Sale Yet to Occur
Amendment
8. Duration of Offering
Does the Issuer intend this offering to last more than one year? C Yes No
9. Type(s) of Securities Offered (select all that apply)
Pooled Investment Fund Fund Fund
Interests
Mineral Property Securities
Security to be Acquired Upon
Exercise of Option, Warrant or Other Right to Acquire Security Other (describe)
Includes shares of Preferred Stock
issuable upon exercise of warrants and shares of Common Stock issuable upon
conversion of Preferred Stock
10. Business Combination Transaction
Is this offering being made in connection with a business combination C Yes No
transaction, such as a merger, acquisition or exchange offer?
Clarification of Response (if Necessary)
11. Minimum Investment
Minimum investment accepted from any outside \$ 0 USD
investor
12. Sales Compensation
Recipient Recipient CRD Number None
(Associated) Broker or Dealer None (Associated) Broker or Dealer CRD None Number
Trainbet
Street Address 1 Street Address 2
Street Address 1 Street Address 2
Street Address 1 Street Address 2 City State/Province/Country ZIP/Postal Code
City State/Province/Country ZIP/Postal Code
City State/Province/Country ZIP/Postal Code
City State/Province/Country ZIP/Postal Code
City State/Province/Country ZIP/Postal Code State(s) of Solicitation All States
City State/Province/Country ZIP/Postal Code
City State/Province/Country ZIP/Postal Code State(s) of Solicitation All States
City State/Province/Country ZIP/Postal Code State(s) of Solicitation All States 13. Offering and Sales Amounts

Clarification of Response (if Necessary)
14. Investors
Select if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, Number of such non-accredited investors who already have invested in the offering
Regardless of whether securities in the offering have been or may be sold to persons who do not qualify as accredited investors, enter the total number of investors who already have invested in the offering:
15. Sales Commissions & Finders' Fees Expenses
Provide separately the amounts of sales commissions and finders' fees expenses, if any. If the amount of an expenditure is not known, provide an estimate and check the box next to the amount. Sales Commissions \$ 0 USD Estimate Finders' Fees \$ 0 USD Estimate
Clarification of Response (if Necessary)
16. Use of Proceeds
Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.
\$ USD Estimate
Clarification of Response (if Necessary)
Signature and Submission

Please verify the information you have entered and review the Terms of Submission below before signing and clicking SUBMIT below to file this notice.

Terms of Submission

In submitting this notice, each Issuer named above is:

- Notifying the SEC and/or each State in which this notice is filed of the offering of securities
 described and undertaking to furnish them, upon written request, the information furnished to
 offerees.
- Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State in which the Issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against it in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which
- Certifying that, if the issuer is claiming a Regulation D exemption for the offering, the issuer is not disqualified from relying on Regulation D for one of the reasons stated in Rule 505(b)(2)(iii) or Rule 506(d)

Each Issuer identified above has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

Issuer	Signature	Name of Signer	Title	Date
TREVENA INC	/s/Maxine Gowen		President and Chief Executive Officer	2010-07-14