

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL	
OMB Number:	3235-0104
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1. Name and Address of Reporting Person* <u>Stutts Mary E.</u>			2. Date of Event Requiring Statement (Month/Day/Year) <u>09/21/2020</u>		3. Issuer Name and Ticker or Trading Symbol <u>ZOGENIX, INC. [ZGNX]</u>	
(Last)	(First)	(Middle)	4. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director Officer (give title below)			5. If Amendment, Date of Original Filed (Month/Day/Year)
C/O ZOGENIX, INC. 5959 HORTON ST., SUITE 500			10% Owner			6. Individual or Joint/Group Filing (Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person Form filed by More than One Reporting Person
(Street)	(City)	(State)	(Zip)	Other (specify below)		
EMERYVILLE CA 94608						

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)
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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			

Explanation of Responses:

Remarks:

Exhibit 24.1: Power of Attorney
No securities are beneficially owned.

/s/ Thomas Doyle, Attorney-in-fact for Reporting Person 09/23/2020

** 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.

ZOGENIX, INC.

POWER OF ATTORNEY

Know all by these presents, that the undersigned hereby constitutes and appoints each of Michael P. Smith, Thomas Doyle and Shawnte Mitchell,

- (1) prepare, execute in the undersigned's name and on the undersigned's behalf, and submit to the U.S. Securities and Exchange Commission (the
- (2) execute for and on behalf of the undersigned, in the undersigned's capacity as an officer and/or director of Zogenix, Inc., a Delaware Corp
- (3) do and perform any and all acts for and on behalf of the undersigned which may be necessary or desirable to complete and execute any such :
- (4) take any other action of any type whatsoever in connection with the foregoing which, in the opinion of such attorney-in-fact, may be of be

The undersigned hereby grants to each such attorney-in-fact full power and authority to do and perform any and every act and thing whatsoever :
The undersigned agrees that each such attorney-in-fact herein may rely entirely on information furnished orally or in writing by the under
This Power of Attorney supersedes any power of attorney previously executed by the undersigned regarding the purposes outlined in the first
This Power of Attorney shall remain in full force and effect until the undersigned is no longer required to file Forms 3, 4, and 5 with re

IN WITNESS WHEREOF, the undersigned has caused this Power of Attorney executed as of this 17th day of September, 2020.

Signature: /s/ Mary E. Stutts
Name: Mary E. Stutts