Edgar Filing: AMAG PHARMACEUTICALS INC. - Form 4

AMAG PHA Form 4 August 05, 2	RMACEUTICA 015	LS INC.								
FORM								-	PROVAL	
	UNITED	UNITED STATES SECURITIES AND EXCHANGE COMMISSIC Washington, D.C. 20549						OMB Number:	3235-0287	
Check thi if no long subject to Section 1 Form 4 or	6.	IENT OF CH		GES IN BENEFICIAL OWNERS SECURITIES				Expires: Estimated a burden hou response	ed average nours per	
Form 5 obligations may continue. See Instruction 1(b). 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 R	Responses)									
HEIDEN WILLIAM K Syn			. Issuer Name and Ticker or Trading mbol MAG PHARMACEUTICALS IC. [AMAG]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) C/O AMAG PHARMAC WINTER ST	EUTICALS, INC	(Mo 08/	ate of Earliest Tr nth/Day/Year) 03/2015	ansaction			X Director X Officer (give below)		Owner er (specify	
			Amendment, Da d(Month/Day/Year	-	l		 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
	I, MA 02451						Person			
(City)	(State)	(Zip)	Table I - Non-D	Derivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	e 2A. Deemed Execution Dat any (Month/Day/Y	Code	4. Securit on(A) or Di (Instr. 3, Amount	spose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock	08/03/2015		S <u>(1)</u>	2,000	D	\$ 64.53	204,721	D		

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

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 Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address		Relationships						
	Director	10% Owner	Officer	Other				
HEIDEN WILLIAM K C/O AMAG PHARMACEUTICALS, 1 1100 WINTER STREET WALTHAM, MA 02451	INC. X		CEO					
Signatures								
Nancy R. Smith, attorney-in-fact	08/05/2015							

Date

**Signature of Reporting Person

Explanation of Responses:

- * 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).
- (1) The reported transaction on this Form 4 was effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on March 3, 2015.

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.