Edgar Filing: ATHENAHEALTH INC - Form 4

ATHENAHE	ALTH INC											
Form 4												
March 04, 20	15											
FORM	1									PPROVAL		
	UNITED	STATES			AND EX(, D.C. 20:		NGE	COMMISSION	OMB Number:	3235-0287		
Check this							Expires:	January 31,				
if no long subject to	STATEN	MENT O	F CHAN	IGES IN BENEFICIAL OWNERSHI				NERSHIP OF	Estimated a	2005		
Section 16	5.			SECUI	RITIES				burden hou	0		
Form 4 or									response	•		
Form 5 obligation	· .							ge Act of 1934,				
may conti				•	•	- ·		of 1935 or Sectio	n			
See Instru		30(h)	of the Inv	vestment	t Compan	y Act	of 19	40				
1(b).												
(Drint or Tuno D	22 7 2 7 222)											
(Print or Type R	esponses)											
KOSECOFF JACQUELINE B Symbol				2. Issuer Name and Ticker or Trading ymbol ATHENAHEALTH INC [ATHN]				5. Relationship of Reporting Person(s) to Issuer				
								(Chaok all and include)				
(Last)	(First) ((Check				ck all applicable	k all applicable)					
			(Month/Da		Tunbuction			X Director	10%	b Owner		
				/02/2015				Officer (give title Other (specify				
ARSENAL S	STREET							below)	below)			
	(Street)		4. If Amer	ndment. D	ate Original			6. Individual or J	oint/Group Filin	ng(Check		
· · · · · · · · · · · · · · · · · · ·				led(Month/Day/Year)				Applicable Line)				
				·	·			$_X_Form filed by$				
WATERTO	WN, MA 02472							Form filed by M Person	More than One Re	eporting		
(City)	(State)	(Zip)		.								
(eng)	(State)	(L . P)	Table	e I - Non-J			ties Ac	quired, Disposed o	f, or Beneficial	lly Owned		
1.Title of	2. Transaction Da			3. T	4. Securi			5. Amount of	6. Ownership	7. Nature of		
Security (Instr. 3)	(Month/Day/Year	any	on Date, if	TransactionAcquired (A) or Code Disposed of (D)				Securities Beneficially	Form: Direct (D) or	Indirect Beneficial		
(11501.5)			/Day/Year)	(Instr. 8) (Instr. 3, 4 and 5)				Owned		Ownership		
								Following	(Instr. 4)	(Instr. 4)		
						(A)		Reported Transaction(s)				
						or		(Instr. 3 and 4)				
C				Code	V Amount	(D)	Price	(
Common Stock	03/02/2015			А	1,569 (1)	А	\$0	7,279	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)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. onNumber 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 Owna Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
KOSECOFF JACQUELINE B C/O ATHENAHEALTH, INC. 311 ARSENAL STREET WATERTOWN, MA 02472	Х						
Signatures							
/s/ Daniel H. Orenstein Attorney-in-Fact	03/04/2015						
**Signature of Reporting Person		Date					

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) Represents an award of restricted stock units pursuant to the Issuer's 2007 Stock Option and Incentive Plan, as amended and restated. The restricted stock units fully vest on June 1, 2016.

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.