ATHENAHEALTH INC

Form 4 March 03, 2016

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB agas

OMB APPROVAL

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Form 5
obligations
may continue.
See Instruction

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * Matus Kristi Ann			2. Issuer Name and Ticker or Trading Symbol ATHENAHEALTH INC [ATHN]	5. Relationship of Reporting Person(s) to Issuer			
(Last)	(Last) (First)		3. Date of Earliest Transaction	(Check all applicable)			
			(Month/Day/Year)	Director 10% Owner			
C/O ATHENAHEALTH, INC., 311 ARSENAL STREET			03/01/2016	_X_ Officer (give title Other (spec below) below) EVP and CFAO			
(Street)			4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check			
WATERTOWN, MA 02472			Filed(Month/Day/Year)	Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			

(City)	(State)	(Zip) Tabl	le I - Non-I	Derivative Secu	rities Acqu	ired, Disposed of	, or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities A or(A) or Dispose (Instr. 3, 4 and	ed of (D)	5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code V	or Amount (D)		Transaction(s) (Instr. 3 and 4)		
Common Stock	03/01/2016		S	415 (1) D	\$ 129.53	33,357	D	
Common Stock	03/01/2016		M	2,354 A	<u>(2)</u>	35,711	D	
Common Stock	03/01/2016		F	765 (3) D	\$ 132.37	34,946	D	
Common Stock						200	I	By IRA

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

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SEC 1474 (9-02)

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. Number on Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Restricted Stock Unit	<u>(4)</u>	03/01/2016		M	2,354	(5)	03/01/2019	Common Stock	2,354

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Matus Kristi Ann C/O ATHENAHEALTH, INC. 311 ARSENAL STREET WATERTOWN, MA 02472

EVP and CFAO

Signatures

/s/ Lan Marinelli
Attorney-in-Fact
03/03/2016

**Signature of Reporting Person Dat

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 sale reported on this Form 4 was made pursuant to a written trading plan adopted by the Reporting Person on June 4, 2015, in accordance with Rule 10b5-1.
- (2) Restricted Stock Unit convert into common stock on a one-for-one basis.
- (3) Shares withheld to satisfy tax withholding obligations incurred upon the vesting of restricted stock units. This transaction is considered an exempt sale pursuant to Rule 16b-3(e) promulgated under the Securities Exchange Act of 1934.
- (4) Each restricted stock unit represents a contingent right to receive one share of the Issuer's common stock.

(5)

Reporting Owners 2

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On March 2, 2015, the Reporting Person was granted 9,416 restricted stock units. The restricted stock units vest in four equal annual installments beginning on March 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.