Byers Carl B. Form 4 December 03, 2008

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

OMB Number: 3235-0287

OMB APPROVAL

Expires: January 31, 2005

Estimated average burden hours per response... 0.5

Check this box if no longer subject to Section 16. Form 4 or

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 * Byers Carl B. | | | 2. Issuer Name and Ticker or Trading Symbol ATHENAHEALTH INC [ATHN] | 5. Relationship of Reporting Person(s) to Issuer | | |
|---------------------------------------------------------|----------|----------|----------------------------------------------------------------------------|---------------------------------------------------------|--|--|
| (Last) | (First) | (Middle) | 3. Date of Earliest Transaction | (Check all applicable) | | |
| | | | (Month/Day/Year) | Director 10% Owner | | |
| C/O ATHENAHEALTH, INC., 311 ARSENAL STREET | | | 12/01/2008 | X Officer (give title Other (specify below) | | |
| THOLIVIE | TILLI | | | Senior VP, CFO and Treasurer | | |
| | (Street) | | 4. If Amendment, Date Original | 6. Individual or Joint/Group Filing(Check | | |
| | | | Filed(Month/Day/Year) | Applicable Line) _X_ Form filed by One Reporting Person | | |
| WATERTOWN, MA 02472 | | | | Form filed by More than One Reporting Person | | |

| (City) | (State) | (Zip) Table | e I - Non-D | erivative | Secur | ities Acq | uired, Disposed of | f, or Beneficial | y Owned |
|--------------------------------------|-----------------------------------------|-------------------------------------------------------------|-------------------------------------------------------------------------------------------------|-----------|------------------|------------------------------------------------------------------|----------------------------------------------------------------------|-------------------------------------------------------------------|---------|
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) | | | 5. Amount of Securities Beneficially Owned Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | Code V | Amount | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | | |
| Common Stock | 12/01/2008 | | S | 100 (1) | D | \$ 25.79 | 268,555 | D | |
| Common Stock | 12/01/2008 | | S | 100 (1) | | | 268,455 | D | |
| Common Stock | 12/01/2008 | | S | 100 (1) | D | \$ 26.49 | 268,355 | D | |
| Common Stock | 12/01/2008 | | S | 100 (1) | D | \$ 26.5 | 268,255 | D | |
| Common Stock | 12/01/2008 | | S | 100 (1) | D | \$ 26.71 | 268,155 | D | |

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| Common Stock | 12/01/2008 | S | 100 (1) D | | 268,055 | D |
|-----------------|------------|---|-----------|-------------|---------|---|
| Common Stock | 12/01/2008 | S | 100 (1) D | \$ 26.34 | 267,955 | D |
| Common Stock | 12/01/2008 | S | 100 (1) D | \$ 26.53 | 267,855 | D |
| Common Stock | 12/01/2008 | S | 100 (1) D | | | D |
| Common Stock | 12/01/2008 | S | | \$ 26.02 | | 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.

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. Transacti Code (Instr. 8) | 5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) | 3 | ate | 7. Title Amount Underly Securit (Instr. | nt of lying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr |
|-----------------------------------------------------|-----------------------------------------------------------------------|-----------------------------------------|-------------------------------------------------------------|---------------------------------------|----------------------------------------------------------------------------------------------|---------------------|--------------------|-----------------------------------------------------|----------------------------------------|-----------------------------------------------------|-----------------------------------------------------|
| | | | | Code V | (Instr. 3, 4, and 5) (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|--------------------------------|---------------|-----------|------------|-------|--|--|--|
| | Director | 10% Owner | Officer | Other | | | |
| Byers Carl B. | | | Senior VP, | | | | |
| C/O ATHENAHEALTH, INC. | | | CFO and | | | | |
| 311 ARSENAL STREET | | | | | | | |
| WATERTOWN, MA 02472 | | | Treasurer | | | | |

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Signatures

/s/ Daniel H. Orenstein Attorney-in-Fact

12/03/2008

**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) The sales reported on this Form 4 were made pursuant to a written trading plan adopted by the Reporting Person on January 8, 2008 in accordance with SEC Rule 10b5-1.

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.

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