ATHENAHEALTH INC

Form 4

February 03, 2017

FORM 4

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

OMB 3235-0287

Check this box if no longer subject to

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

Number: January 31, 2005

OMB APPROVAL

subject to Section 16. Form 4 or Form 5 SECURITIES

SECURITIES

Estimated average burden hours per response... 0.5

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).

(City)

(Print or Type Responses)

1. Name and Address of Reporting Person * Khot Prakash			2. Issuer Name and Ticker or Trading Symbol ATHENAHEALTH INC [ATHN]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)		
(Last) (First) (M		(Middle)	3. Date of Earliest Transaction	, 11		
			(Month/Day/Year)	Director 10% Owner		
C/O ATHEN ARSENAL S		I, INC., 311	02/01/2017	X Officer (give title Other (specify below) SVP, Chief Technology Officer		
(Street)			4. If Amendment, Date Original 6. Individual or Joint/Group F			
			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)	Table Table	e I - Non-D	Derivative	Secur	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. Transactio Code (Instr. 8)	4. Securi on(A) or Di (Instr. 3,	ispose	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)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	02/01/2017		M	3,125	A	\$ 0 (1)	3,125	D	
Common Stock	02/01/2017		F	1,054	D (2)	\$ 124.88	2,071	D	

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

(Zin)

(State)

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SEC 1474

(9-02)

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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 of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exer Expiration D (Month/Day)	ate	7. Title and L Underlying S (Instr. 3 and	Securities
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Restricted Stock Unit	(3)	02/01/2017		M	3,125	<u>(4)</u>	03/01/2020	Common Stock	3,125

Reporting Owners

Reporting Owner Name / Address	Relationships
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Director 10% Owner Officer Other

Khot Prakash C/O ATHENAHEALTH, INC. 311 ARSENAL ST. WATERTOWN, MA 02472

SVP, Chief Technology Officer

Signatures

/s/ Lan Marinelli, Attorney-in-Fact

02/03/2017

**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) A restricted stock unit ("RSU") converts into common stock on a one-for-one basis.
- (2) Shares withheld to satisfy tax withholding obligations incurred upon the vesting of RSUs. This transaction is considered an exempt sale pursuant to Rule 16b-3(e) promulgated under the Securities Exchange Act of 1934.
- (3) Each RSU represents a contingent right to receive one share of the Issuer's common stock.
- On March 1, 2016, the Reporting Person was granted 12,500 RSUs. The RSUs vest in four equal annual installments beginning on February 1, 2017.

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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