## Edgar Filing: Simas Matthew Joseph - Form 4

Simas Matth Form 4	ew Joseph										
May 25, 201	ГЛ					~~~		~~~~~~~~~		PPROVAL	
Check thi	UNITE	Washington, D.C. 20549									
if no long subject to Section 1 Form 4 o Form 5	6. Filed p	ox <b>STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF</b> <b>SECURITIES</b> Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,								Expires: January 31 2005 Estimated average burden hours per response 0.5	
obligation may cont <i>See</i> Instru 1(b).	ns Section 17	Section 17(a) of the Public Utility Holding Company Act of 1935 or Section									
(Print or Type F	Responses)										
1. Name and Address of Reporting Person <u>*</u> Simas Matthew Joseph			2. Issuer Name <b>and</b> Ticker or Trading Symbol MAGELLAN HEALTH INC					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) 4800 N. SCOTTSDALE ROAD, SUITE 4400			[MGLN] 3. Date of Earliest Transaction (Month/Day/Year) 05/24/2018					X_ Director 10% Owner Officer (give title Other (specify below) below)			
	Fil			ndment, Dat th/Day/Year)	-			<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>			
SCOTTSDA	ALE, AZ 85251							Person		oporting	
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	Securi	ties Ac	quired, Disposed o	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	any				4. Securities onAcquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Ordinary				Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)			
Common Stock, \$0.01 par value	05/24/2018			А	1,685 (1)	А	\$ 0 (2)	1,685	D		

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

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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. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Under Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne 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			
Simas Matthew Joseph 4800 N. SCOTTSDALE RC SUITE 4400 SCOTTSDALE, AZ 85251	DAD	Х						
Signatures								
/s/ Matthew J. Simas	05/2	5/2018						
<u>**</u> Signature of Reporting Person	D	ate						

## **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) Annual director restricted stock award pursuant to 2016 Management Incentive Plan. Shares shall vest fully on the date of the 2019 Annual Meeting of Shareholders.
- (2) Not applicable.

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.