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Leicher Bruce Form 4	e											
May 23, 2018	3											
FORM	FORM 4 LINITED STATES SECURITIES AND EXCHANCE COMMISSION								r	OMB APPROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287			
Check this if no long subject to Section 16 Form 4 or Form 5	er STATE 5.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES										
obligation may conti <i>See</i> Instru- 1(b).	$\frac{1}{1}$ Section 17	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										
(Print or Type R	esponses)											
Leicher Bruce Syn Me PH			Symbol MOMEN PHARM	MOMENTA PHARMACEUTICALS INC				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) C/O MOME PHARMACI BINNEY ST	EUTICALS, IN	(Middle) JC., 301	[MNTA] 3. Date of (Month/D 05/21/20	- Earliest Tra ay/Year)	ansaction			Director X Officer (give below) SVP &		o Owner er (specify sel		
				ndment, Date Original hth/Day/Year)				6. Individual or Joint/Group Filing(CheckApplicable Line)_X_ Form filed by One Reporting Person				
CAMBRIDO	GE, MA 02142							Form filed by N Person	More than One Re	porting		
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	Securi	ties Acq	uired, Disposed of	f, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Yea	r) Executio any		3. Transactio Code (Instr. 8) Code V	on(A) or Di (D) (Instr. 3,	ispose	d of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
Common Stock	05/21/2018			S <u>(1)</u>	351	D	\$ 23.4	171,047	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)	Code	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	7. Titl Amou Under Secur (Instr.	int 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				
Leicher Bruce C/O MOMENTA PHARMACEUTICALS, ING 301 BINNEY STREET CAMBRIDGE, MA 02142	С.		SVP & General Counsel					
Signatures								
/s/ Marie T. Washburn as attorney in fact	05/23/2018							
**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) This transaction was effected pursuant to a Rule 10b5-1 trading plan.

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.