## Edgar Filing: MEDICINES CO /DE - Form 4

MEDICINES	CO /DE										
Form 4											
May 31, 2016	5										
FORM	Δ									PPROVAL	
	UNITED	STATES		ITIES Al hington, 1			NGE (	COMMISSION	OMB Number:	3235-0287	
Check this if no long	or.								Expires:	January 31,	
subject to	STATEM	IENT OF	F CHANO	GES IN BENEFICIAL OWN				NERSHIP OF	Estimated a	2005 average	
	Section 16.				SECURITIES				burden hou	ours per	
Form 4 or Form 5		Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,							response	0.5	
obligation	<sup>IS</sup> Section 17(						-	of 1935 or Section	m		
may conti	nue.			/estment (	•				/11		
See Instru 1(b).	ction		01 010 111	• • • • • • • • •	compun.	,	01 19				
(Print or Type R	esponses)										
1. Name and Address of Reporting Person <u>2</u> . Issuer Na				Name <b>and</b> Ticker or Trading				5. Relationship of Reporting Person(s) to			
Spigelman Melvin K Symbol			Symbol					Issuer			
			MEDICI	INES CO	/DE [M]	DCO	]	(Check all applicable)			
(Last)	(First) (N	Middle)	3. Date of	Earliest Tra	insaction			(end	en un appricaen	-)	
			/Day/Year)				X_Director10% Owner				
			05/26/2016					Officer (give titleOther (specify below)			
(Street) 4. If An			4. If Amen	Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
			Filed(Mont	h/Day/Year)				Applicable Line)			
	IX NH 07054							_X_ Form filed by Form filed by N	One Reporting Pe More than One Re		
PARSIPPAN	NY, NJ 07054							Person		1 0	
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	ecuri	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of	2. Transaction Dat	e 2A. Deer	med	3.	4. Securi	ties		5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Year) Execution Date, if any (Month/Day/Year)			Code Disposed of (D)				Securities	Form: Direct	Indirect	
(Instr. 3)								Beneficially Owned	` /	Beneficial Ownership	
		(intolicity)	Suj, i cui)	(msu: o)	(1150.5,	i una	5)	Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported			
						or		Transaction(s) (Instr. 3 and 4)			
Commen				Code V		(D)	Price	(			
Common Stock	05/26/2016			А	3,426 <sup>(1)</sup>	А	\$0	42,396	D		
Stock					<u> </u>						

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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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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. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	ative Expiration Date es (Month/Day/Year) d d of		7. Title and Amount o Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D	) Date Exercisable	Expiration Date	Title	Amoun or Number of Shares
Stock Option (right-to-buy)	\$ 37.22	05/26/2016		А	9,700	(2)	05/26/2026	Common Stock	9,700

## **Reporting Owners**

Reporting Owner Name / Address		Relationsh			
1	Director	10% Owner	Officer	Other	
Spigelman Melvin K 8 SYLVAN WAY PARSIPPANY, NJ 07054	Х				
Signatures					
/s/ Stephen M. Rodin, Attorney Spigelman	05/31/2016				
<u>**</u> Signature of Re	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 restricted stock award vests on May 26, 2017 and is made as part of and pursuant to Issuer's director compensation package.
- (2) This option vests in one installment on May 26, 2017 and is made as part of and pursuant to Issuer's director compensation package.

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.