Hecht Peter M Form 4 August 17, 2012

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB

OMB APPROVAL

Number:

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subject to Section 16. Form 4 or Form 5 obligations may continue.

Check this box

if no longer

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

See Instruction

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * Hecht Peter M

2. Issuer Name and Ticker or Trading

Symbol

IRONWOOD

PHARMACEUTICALS INC

[IRWD]

(Last) (First) (Middle) 3. Date of Earliest Transaction

> (Month/Day/Year) 07/27/2012

(Check all applicable)

5. Relationship of Reporting Person(s) to

_X__ Director 10% Owner X_ Officer (give title _ Other (specify below)

Chief Executive Officer

C/O IRONWOOD

PHARMACEUTICALS, INC., 301

BINNEY STREET

(Street) 4. If Amendment, Date Original

Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check

Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting

Issuer

CAMBRIDGE, MA 02142

(City)	(State) (Z	Zip) Table	I - Non	-De	rivative S	ecurit	ties Acc	quired, Disposed	of, or Beneficia	lly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code (Instr.		4. Securities onAcquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or		5. Amount of Securities Form: Direct Beneficially (D) or Owned Indirect (I) Following (Instr. 4) Reported Transaction(s)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code	V	Amount	(D)	Price	(Instr. 3 and 4)		The 2000
Class A Common Stock	07/27/2012		G	V	970	A	\$0	2,985	I	Trust for Malcolm Paul Hecht
Class A Common Stock	07/27/2012		G	V	970	A	\$ 0	2,985	I	The 2000 Trust for Alexis Mae Hecht

								<u>(1)</u>
Class A Common Stock	08/15/2012	G	V 970	A	\$ 0	2,985	I	The 2000 Trust for Zoe Niovi Hecht (1)
Class A Common Stock						22,803	D	
Class B Common Stock						3,649,751	D	

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

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(9-02)

9. Nu Deriv Secu Bene Own Follo Repo Trans (Insti

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Tit	le and	8. Price of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transac	ctionNumber	Expiration D	ate	Amou	ınt of	Derivative
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Unde	rlying	Security
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8	Derivativ	e		Secur	rities	(Instr. 5)
	Derivative				Securities	S		(Instr	. 3 and 4)	
	Security				Acquired					
					(A) or					
					Disposed					
					of (D)					
					(Instr. 3,					
					4, and 5)					
									Amount	
						Date	Evaluation		or	
						Exercisable	Expiration Date	Title	Number	
						LACICISADIC	Date		of	
				Code	V (A) (D)				Shares	

Reporting Owners

Reporting Owner Name / Address	Relationships						
. 0	Director	10% Owner	Officer	Other			
Hecht Peter M C/O IRONWOOD PHARMACEUTICALS, INC. 301 BINNEY STREET CAMBRIDGE MA 02142	X		Chief Executive Officer				

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Signatures

/s/ Halley E. Gilbert Attorney-in-Fact

08/17/2012

**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).
- These shares are held in the referenced trust for the benefit of the reporting person's child. The reporting person's spouse is the trustee of (1) this trust. The reporting person disclaims beneficial ownership of these securities, and the filing of this report is not an admission that the reporting person is the beneficial owner of these securities for purposes of Section 16 or any other purpose.

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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