### Edgar Filing: IRONWOOD PHARMACEUTICALS INC - Form 4

#### IRONWOOD PHARMACEUTICALS INC

Form 4

January 03, 2014

# FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**OMB** Number:

3235-0287

Expires:

January 31, 2005

0.5

Estimated average

**OMB APPROVAL** 

burden hours per

response...

if no longer subject to Section 16. Form 4 or Form 5

obligations

may continue.

See Instruction

Check this box

**SECURITIES** 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).

(Print or Type Responses)

1. Name and Address of Reporting Person \*

2. Issuer Name and Ticker or Trading

**IRONWOOD** 

5. Relationship of Reporting Person(s) to

Issuer

MCGUIRE TERRANCE

Symbol

PHARMACEUTICALS INC

(Check all applicable)

[IRWD]

3. Date of Earliest Transaction

X\_ Director 10% Owner Other (specify Officer (give title

below)

(Last)

(First) (Middle)

(Month/Day/Year) 01/02/2014

C/O IRONWOOD PHARMACEUTICALS, INC., 301

(Street)

**BINNEY STREET** 

4. If Amendment, Date Original

Applicable Line)

Filed(Month/Day/Year)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

6. Individual or Joint/Group Filing(Check

CAMBRIDGE, MA 02142

(City)	(State)	(Zip) Tab	le I - Non-l	Derivative Securities A	Acquired, Dispose	ed of, or Benef	icially Owned
1.Title of Security	2. Transaction Date (Month/Day/Year)	Execution Date, if		4. Securities on Acquired (A) or	5. Amount of Securities	6. Ownership	7. Nature of Indirect
(Instr. 3)		any (Month/Day/Year)	Code (Instr. 8)	Disposed of (D) (Instr. 3, 4 and 5)	Beneficially Owned	Form: Direct (D)	Beneficial Ownership
				(A)	Following Reported Transaction(s)	or Indirect (I) (Instr. 4)	(Instr. 4)
			Code V	or Amount (D) Price	(Instr. 3 and 4)	(IIIsu. 4)	
Class A							

Common 01/02/2014  $A^{(1)}$ 9.339 12,254 Α \$0 D

Stock

By Polaris Class A Venture Common 1,626 I Stock

Management Co. II, L.L.C.

(2)

40,000 I

1

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Class B Common Stock

By Bartlett Partners, LLC

(3)

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

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SEC 1474 (9-02)

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

	Transaction Date fonth/Day/Year)		4. Transaction Code (Instr. 8)
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6. Date Exercisable and 7. Title and onNumber **Expiration Date** Amount of (Month/Day/Year) Derivative Securities Acquired (A) or Disposed

> Date Exercisable

Date

8. Price of Derivative Security (Instr. 5)

Underlying Securities (Instr. 3 and 4)

Bene Own Follo Repo Trans (Insti

9. Nu

Deriv

Secu

Amount or

Expiration Title Number of

Shares

**Reporting Owners** 

Reporting Owner Name / Address

Relationships

of (D)

Code V (A) (D)

(Instr. 3, 4, and 5)

Director 10% Owner Officer Other

MCGUIRE TERRANCE C/O IRONWOOD PHARMACEUTICALS, INC. 301 BINNEY STREET CAMBRIDGE, MA 02142

X

**Signatures** 

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

01/03/2014

\*\*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) Issued pursuant to the Director Compensation Plan, effective as of January 2014.
- The reporting person is a managing member of Polaris Venture Management Co. II, L.L.C., the beneficial owner of the securities. The reporting person disclaims beneficial ownership of the reported securities, except to the extent of his pecuniary interest therein.

Reporting Owners 2

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(3) The reporting person is a managing member of Bartlett Partners, LLC, the beneficial owner of the securities. The reporting person disclaims beneficial ownership of the securities, except to the extent of his pecuniary interest therein.

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.