Edgar Filing: ATHENAHEALTH INC - Form 4

ATHENAHE Form 4	EALTH INC										
August 13, 2	008										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB AF OMB	OMB APPROVAL		
Check thi if no long subject to Section 1 Form 4 of Form 5 obligation may cont <i>See</i> Instru 1(b).	is box ger STATE 6. r Filed pu ns Section 17	Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF 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 20(b) of the Investment Company Act of 1940							Number: Expires: Estimated a burden hour response		
(Print or Type R	Responses)										
				2. Issuer Name and Ticker or Trading mbol				5. Relationship of Reporting Person(s) to Issuer			
-			-	JAHEAL'	TH INC	[ATH	IN]	(Check all applicable)			
			of Earliest Transaction Day/Year) 2008				Director 10% Owner Officer (give title 0ther (specify below) Senior VP, CFO and Treasurer				
			endment, Date Original onth/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 				
WATERTO	WN, MA 02472	2						Form filed by M Form filed by M Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	Derivative (Securi	ties Aca	uired, Disposed of	or Beneficiall	v Owned	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year) Execution any	ned	3.	4. Securit or(A) or Dis (Instr. 3, 4) Amount	ies Ac sposed	quired of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect	
Common Stock	08/11/2008			S	20,000	D	φ 33.24 (1)	284,200	D		

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)

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. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships								
1	Director	10% Owner	Officer	Other					
Byers Carl B. C/O ATHENAHEALTH, INC. 311 ARSENAL STREET WATERTOWN, MA 02472			Senior VP, CFO and Treasurer						
Signatures									
/s/ Daniel H. Orenstein Attorney-in-Fact	08	8/13/2008							

**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).
- This price represents the weighted average of sales ranging from \$33.00 to \$33.60. Upon request by the Commission staff, the Issuer, or a
 (1) security holder of the Issuer, the Reporting Person will provide full information regarding the number of shares purchased or sold at each separate price.

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.