Byers Carl B. Form 4 November 05, 2009

#### FORM 4

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

OMB Number:

3235-0287

Expires:

Form filed by More than One Reporting

Person

January 31, 2005

Estimated average burden hours per

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

response... 0.5

**OMB APPROVAL** 

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

obligations may continue.

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

**SECURITIES** 

See Instruction

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * Byers Carl B.			2. Issuer Name <b>and</b> Ticker or Trading Symbol	5. Relationship of Reporting Person(s) to Issuer		
			ATHENAHEALTH INC [ATHN]	(Check all applicable)		
(Last)	(First)	(Middle)	3. Date of Earliest Transaction			
			(Month/Day/Year)	Director 10% Owner		
C/O ATHENAHEALTH, INC., 311 ARSENAL STREET			11/03/2009	X Officer (give title Other (specify below) SVP and CFO		
	(Street)		4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check		
	(Sirect)		, Company of the comp	o. marviduai of John/Group Filling(Check		
			Filed(Month/Day/Year)	Applicable Line) _X_ Form filed by One Reporting Person		

#### WATERTOWN, MA 02472

(City)	(State) (	Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction(A) or		ecurities Acquired or Disposed of (D) r. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common Stock	11/03/2009		S	100 (1)	D	\$ 40.18	217,955	D		
Common Stock	11/03/2009		S	100 (1)	D	\$ 40.68	217,855	D		
Common Stock	11/03/2009		S	100 (1)	D	\$ 40.41	217,755	D		
Common Stock	11/03/2009		S	200 (1)	D	\$ 39.95	217,555	D		
Common Stock	11/03/2009		S	200 (1)	D	\$ 39.79	217,355	D		

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Common Stock	11/03/2009	S	100 (1) D		217,255	D
Common Stock	11/03/2009	S	100 (1) D	\$ 39.88	217,155	D
Common Stock	11/03/2009	S	200 (1) D	\$ 39.75	216,955	D
Common Stock	11/03/2009	S	100 (1) D	\$ 39.8	216,855	D
Common Stock	11/03/2009	S	300 (1) D	\$ 39.76	216,555	D

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)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. DrNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		ate	7. Titl Amou Under Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr
			Code V	4, and 5)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Byers Carl B.								
C/O ATHENAHEALTH, INC.			CVD and CEO					
311 ARSENAL STREET		SVP and CFO						
WATERTOWN, MA 02472								

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### **Signatures**

/s/ Daniel H. Orenstein Attorney-in-Fact

11/05/2009

\*\*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) The sales reported on this Form 4 were made pursuant to a written trading plan adopted by the Reporting Person on December 16, 2008, in accordance with Rule 10b5-1.

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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