Edgar Filing: KWON YOUNG - Form 4

Form 4	JNG										
August 23, 2											
FORM	4 UNITE	D STATES		ATTIES A			NGE C	COMMISSION	OMB OMB Number:	PROVAL 3235-0287	
Check thi if no long subject to Section 1 Form 4 or Form 5	ger STATH 6. r	STATEMENT OF CHANGES IN BI SECURIT						Expires:January 31 2001Estimated average burden hours per response0.4			
Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 19 Section 17(a) of the Public Utility Holding Company Act of 1935 or S 30(h) of the Investment Company Act of 1940							1935 or Section	n			
(Print or Type F	Responses)										
KWON YOUNG Symb MON				MENTA RMACEUTICALS INC				5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner			
(Last) C/O MOME PHARMAC BINNEY ST	EUTICALS, II	(Middle) NC., 301	3. Date of (Month/D 08/21/20		ansaction			X Officer (give below) SVP, Corj	title Othe below) porate Develop	er (specify ment	
	(Street) 4. If Amer Filed(Mon				-	1		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
CAMBRID	GE, MA 02142	2						Form filed by M Person	Iore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	ar) Execution any		3. Transactio Code (Instr. 8) Code V	4. Securi n(A) or Di (Instr. 3, Amount	spose	d 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)		
Common Stock	08/21/2018			S <u>(1)</u>	528	D	\$ 27.25	111,343	D		

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

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 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. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration Date (Month/Day/Year)		Amount of		Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V		Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

	Relationships						
Director	10% Owner	Officer	Other				
NC.		SVP, Corporate Development					
08/23/2018							
	Director NC. 08/23/2018	NC.	Director 10% Owner Officer NC. SVP, Corporate Development				

**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) This transaction was effected pursuant to a Rule 10b5-1 trading plan.

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.