Edgar Filing: Bonventre Joseph Vincent - Form 4

Bonventre Joseph V Form 4	Vincent					
	UNITED STATES	OMB APPROVAL OMB 3235-0 Number:				
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. <i>See</i> Instruction 1(b).	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 30(h) of the Investment Company Act of 1940				January 31, 2005Expires:2005Estimated average burden hours per response0.5	
(Print or Type Response	es)					
1. Name and Address of Reporting Person <u>*</u> Bonventre Joseph Vincent		2. Issuer Name and Ticker or Trading Symbol AMAG PHARMACEUTICALS INC. [AMAG]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (Fi C/O AMAG PHARMACEUTIC HAYDEN AVEN		3. Date of Earliest Transaction (Month/Day/Year) 05/24/2011	X Director Officer (give t below)	itle $\frac{10\%}{\text{below}}$ Oth	6 Owner er (specify	
		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 Person			
(City) (Sta	ate) (Zip)	Table I - Non-Derivative Securities A		or Beneficial	lly Owned	
	saction Date 2A. Deem /Day/Year) Execution any (Month/D	a Date, if TransactionAcquired (A) or Code Disposed of (D) ay/Year) (Instr. 8) (Instr. 3, 4 and 5) (A) or	SecuritiesForBeneficially(DOwned(D)	orm: Direct)) or Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Reminder: Report on a	separate line for each c	Code V Amount (D) Price lass of securities beneficially owned directly o	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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Options	\$ 15.41	05/24/2011		А	3,800	(1)	05/24/2021	Common Stock	3,800
Restricted Stock Unit	<u>(3)</u>	05/24/2011		А	1,900	(4)	(5)	Common Stock	1,900

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Reporting Owners

Reporting Owner Name / Address		Relationships				
	Director	10% Owner	Officer	Other		
Bonventre Joseph Vincent C/O AMAG PHARMACEUTICALS, INC 100 HAYDEN AVENUE LEXINGTON, MA 02421	X					
Signatures						
Joseph L. Farmer, 05/ attorney-in-fact	25/2011					

**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).
- Grant of stock option pursuant to the AMAG Pharmaceuticals, Inc. Second Amended and Restated 2007 Equity Incentive Plan. This (1)option will vest and become exercisable in twelve equal monthly installments over one year from the date of grant.
- (2) Price is not applicable.
- (3) Each restricted stock unit represents a contingent right to receive one share of the Issuer's common stock.

Grant of restricted stock unit pursuant to the AMAG Pharmaceuticals, Inc. Second Amended and Restated 2007 Equity Incentive Plan. This grant will vest in equal monthly installments over one year from the date of grant; however, delivery of the shares is deferred until (4) the earlier of (a) three years from the date of grant or (b) the date the reporting person no longer serves as a member of the Board of

Directors of AMAG Pharmaceuticals, Inc. (5) Not applicable.

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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