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

### IRONWOOD PHARMACEUTICALS INC

Form 4

September 16, 2015

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).	STATE Filed p	EMENT Oursuant to 7(a) of the	S SECURITIES AND EXCHANGE OF Washington, D.C. 20549  F CHANGES IN BENEFICIAL OW SECURITIES  Section 16(a) of the Securities Exchange Public Utility Holding Company Act of the Investment Company Act of 19	NERSHIP OF ge Act of 1934, f 1935 or Section	OMB Number: Expires: Estimated a burden hour response	verage s per	287
C/O IRONWOOI PHARMACEUT	s of Reportin RANCE First) D ICALS, II	(Middle)	2. Issuer Name and Ticker or Trading Symbol IRONWOOD PHARMACEUTICALS INC [IRWD] 3. Date of Earliest Transaction (Month/Day/Year) 09/15/2015	5. Relationship of I Issuer  (Check _X_ Director Officer (give to below)	x all applicable)		
CAMBRIDGE, M	Street)	(Zip)	4. If Amendment, Date Original Filed(Month/Day/Year)  Table I - Non-Derivative Securities Ac	6. Individual or Joi Applicable Line) _X_ Form filed by Or Form filed by Mo Person  quired, Disposed of,	ne Reporting Per ore than One Rep	son oorting	

(City)	(State)	(Zip) Tab	le I - Non-l	Derivative	Secu	rities A	cquired, Dispose	ed of, or Benef	icially Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactic Code (Instr. 8)	4. Securi onAcquirec Disposed (Instr. 3,	l (A) of (D) 4 and (A) or	))	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 Beneficial Ownership (Instr. 4)
Class A Common Stock	09/15/2015		A <u>(1)</u>	217	A	\$ 0	19,751	D	
Class A Common Stock							1,626	I	By Polaris Venture Management Co. II, L.L.C.
							29,117	I	

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Class A Common Stock			By Bartlett Partners, LLC
Class B Common Stock	40,000	I	By Bartlett Partners, LLC

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.

SEC 1474

(9-02)

9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

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. Transac Code (Instr. 8	5. etionNumber of S) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	8	ate	Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)
			Code	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	

# **Reporting Owners**

Reporting Owner Name / Address	Relationships					
. 0	Director	10% Owner	Officer	Other		
MCGUIRE TERRANCE						
C/O IRONWOOD PHARMACEUTICALS, INC. 301 BINNEY STREET	X					

# **Signatures**

CAMBRIDGE, MA 02142

/s/ Halley E. Gilbert, Attorney-in-Fact 09/16/2015

\*\*Signature of Reporting Person Date

Reporting Owners 2

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## **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.
- (2) 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.
- (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.