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AUERBACH AL Form 4 May 19, 2011	AN H										
FORM 4									OMB A	PPROVA	۹L
	UNITED	STATES					COMMISSION		OMB 3235-02 Number:		-0287
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, 2005 Estimated average burden hours per response 0.5		
(Print or Type Respor	nses)										
1. Name and Address AUERBACH AI		Person <u>*</u>	Symbol	er Name and Health, Ir		-	5. Relationship o Issuer	-			
(Last) (First) (1	Middle)	3. Date of	of Earliest Ti	ransaction		(Cne	eck all a	applicabl	e)	
C/O RADIUS HEALTH, INC. 201 BROADWAY, 6TH FLOOR			(Month/Day/Year) 05/17/2011			X_ Director 10% Owner Officer (give title Other (specify below) below)					
(Street)			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 					
CAMBRIDGE, N	MA 02139						Person	whore u		eporting	
(City) (S	State)	(Zip)	Tab	ole I - Non-E	Derivative	Securities A	cquired, Disposed	of, or H	Beneficia	lly Owne	d
	nsaction Date th/Day/Year)	2A. Deemo Execution any (Month/Da	Date, if	3. Transaction Code (Instr. 8) Code V	Disposed (Instr. 3, 4	(A) or of (D)	Securities Beneficially Owned	Form:	Direct Indirect	7. Nature Indirect Beneficia Ownersh (Instr. 4)	al iip
Reminder: Report on	a separate line	e for each cla	ass of sec	urities benef	icially own	ned directly of	or indirectly.				
1	·				Perso inform requir	ns who rest nation cont ed to respo ys a curre	spond to the colle ained in this form ond unless the fo ntly valid OMB co	n are n rm		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	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	orDerivative	Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr.	8)	Acquired (A Disposed of (Instr. 3, 4, 5)	f (D)				
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (Right to Buy)	\$ 1.35	05/17/2011		А		256,666		(1)	10/12/2020	Common Stock	256,666

Reporting Owners

Reporting	Relationships						
	Director	10% Owner	Officer	Other			
AUERBACH ALA C/O RADIUS HEA 6TH FLOOR CAMBRIDGE, MA	Х						
Signatures							
/s/ Alan H. Auerbach	05/19/2011						
<u>**</u> 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 options vests in twelve equal quarterly installments with the first quarterly installment vesting on January 1, 2011, and the additional quarterly installments vesting on the first day of each calendar quarter thereafter.

Received in exchange for employee stock options to acquire 256,666 shares of Radius Health, Inc. common stock for \$1.35 per share in connection with the merger of RHI Merger Corp., a wholly-owned subsidiary of the Registrant (f/k/a MPM Acquisition Corp.), with and

(2) into Radius Health, Inc. ("Target") pursuant to which Target survived and became a wholly-owned subsidiary of Registrant (the "Surviving Corporation"). Following such merger, the Surviving Corporation merged with and into its parent corporation, the Registrant, and subsequently changed its name to "Radius Health, Inc."

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.