Edgar Filing: Sasisekharan Ram - Form 4

Sasisekhara	n Ram									
Form 4	10									
June 16, 20 FORN	ЛЛ	STATES	SECU	RITIES A	AND EX	KCHANGI	E COMMISSIO		PPROVAL	
Check t	his hov		Wa	shington,	, D.C. 2	20549		Number:	3235-0287	
if no lor subject Section Form 4 Form 5 obligati	nger to 16. or Filed put	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 Sectio						Estimated burden hou response	Estimated average burden hours per response 0.5	
may con <i>See</i> Inst 1(b).	nunue.			•	•	any Act of 1		011		
(Print or Type	Responses)									
1. Name and Address of Reporting Person [*] Sasisekharan Ram (Last) (First) (Middle) C/O MOMENTA PHARMACEUTICALS, INC., 675 WEST KENDALL STREET			 Issuer Name and Ticker or Trading Symbol MOMENTA PHARMACEUTICALS INC [MNTA] Date of Earliest Transaction (Month/Day/Year) 06/10/2010 			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
						X Director Officer (giv below)		· • •		
(Street) CAMBRIDGE, MA 02142			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)	(State)	(Zip)	Tał	ole I - Non-I	Derivativ	e Securities A	Acquired, Disposed	of. or Beneficia	llv Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		ed Date, if		4. Secur nAcquire Dispose (Instr. 3	ities d (A) or d of (D) , 4 and 5) (A) or	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		7. Nature of Indirect	
Reminder: Re	port on a separate line	e for each cl	ass of sec	urities benef	Pers infor requ	ons who rearmation con ired to resp	or indirectly. spond to the colle tained in this forn ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)	

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

number.

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	nth/Day/Year) Execution Date, if any		4. 5. Number of TransactiorDerivative Code Securities (Instr. 8) 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 Option (Right to Buy)	\$ 12.34	06/10/2010		A <u>(1)</u>	15,000	09/10/2010	06/10/2020	Common Stock	15,000	

Reporting Owners

Reporting Owner Name / Address		Relationships					
	Director	10% Owner	Officer	Other			
Sasisekharan Ram C/O MOMENTA PHARMACEUTICALS, IN 675 WEST KENDALL STREET CAMBRIDGE, MA 02142	VC. X						
Signatures							
/S/ Michael Flanagan as attorney in fact	06/16/2010						
**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) Represents an option granted by the issuer pursuant to the issuer's 2004 Stock Incentive Plan. Subject to certain criteria, the shares subject to such option vest in four equal quarterly installments following the grant date.
- (2) Includes multiple option grants with different pricing and vesting.

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.