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MERRIMAN	RONALD										
Form 4											
July 31, 2012											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION							OMB APPROVAL				
	- UNITED	SIAILS		hington,			NGE (2019119115510N	OMB Number:	3235-0287	
Check this if no longe subject to Section 16 Form 4 or	er STATE	MENT OI			BENEFI		LOW	NERSHIP OF	Expires: Estimated a burden hou	rs per	
Form 5 obligation: may contin <i>See</i> Instruct 1(b).	Filed pu s Section 17	(a) of the l	Public Ut	· · /	ling Com	pany	Act of	e Act of 1934, f 1935 or Sectio 40	response n	0.5	
(Print or Type Ro	esponses)										
MERRIMAN RONALD Symbol			Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First)	(Middle)	3. Date of Earliest Transaction					(Chec	k all applicable	e)	
				Month/Day/Year) 7/27/2012				_X_ Director 10% Owner Officer (give title Other (specify below) below)			
				ndment, Date Original th/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
BRAINTRE	E, MA 02184								Iore than One Re		
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Acc	quired, Disposed of	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	ecurity (Month/Day/Year) Execution Date, if		3.4. Securities AcquiredTransaction(A) or Disposed ofCode(D)(Instr. 8)(Instr. 3, 4 and 5)			d of	Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
Common	07/27/2012				Amount 1,031	, í	Price \$	Transaction(s) (Instr. 3 and 4)	D		
Stock	0//2//2012			Α	<u>(1)</u>	A	0.01	0,170 (2)	D		

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.

 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 prof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisab Expiration Date (Month/Day/Year		7. Title and A Underlying S (Instr. 3 and 4	Seci
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Ai or Ni of Sł
Non-Qualified Stock Option (right to buy)	\$ 72.74	07/27/2012		А	4,098	07/27/2013 <u>(3)</u>	07/27/2019	Common Stock	4
Non-Qualified Stock Option (right to buy)	\$ 41.15					07/27/2005	07/27/2012	Common Stock	7
Non-Qualified Stock Option (right to buy)	\$ 54.48					07/29/2011 <u>(3)</u>	07/29/2017	Common Stock	4
Non-Qualified Stock Option (right to buy)	\$ 58.46					07/31/2009(3)	07/31/2018	Common Stock	5
Non-Qualified Stock Option (right to buy)	\$ 59.44					07/30/2010 <u>(3)</u>	07/30/2016	Common Stock	5
Non-Qualified Stock Option (right to buy)	\$ 68.81					07/21/2012(3)	07/21/2018	Common Stock	3

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Reporting Owners

Reporting Owner Name / Address				
	Director	10% Owner	Officer	Other
MERRIMAN RONALD 400 WOOD ROAD BRAINTREE, MA 02184	Х			
Signatures				
By: /s/ Susan M. Hanlon For: F Merriman	Ronald		07/31/20)12
<u>**</u> Signature of Reporting Pers	on		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) Restricted Stock Unit Grant which vest 100% on the first anniversary of the grant date. Grant was made under 2005 Long Term Incentive Compensation Plan.
- (2) Total includes Restricted Stock Awards and/or Restricted Stock Units that are subject to restrictions until vesting requirements are met. Grant was made under 2005 Long Term Incentive Compensation Plan.
- (3) Grant to reporting person of right to buy shares of common stock exercisable 100 percent on the first anniversary of the date of grant.

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.