Edgar Filing: SMITH BARRY M - Form 4

SMITH BA Form 4	RRY M										
February 02	2, 2018										
FORM	Λ4		CECU				NCE		OMB AF	PROVAL	
	UNITED	STATES		RITIES A shington			NGE CO	OMMISSION	OMB Number:	3235-0287	
Check the check		ICES IN	DENIER				Expires:	January 31, 2005			
subject to STATEMENTO Section 16. Form 4 or			r CHAI	SECUI		ICIA	EKSHIP OF	Estimated a burden hour response	verage		
Form 5 obligation may corn See Insta 1(b).	ons Section 170	(a) of the l	Public U		ding Cor	npan	y Act of	Act of 1934, 1935 or Section			
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> SMITH BARRY M			2. Issuer Name and Ticker or Trading Symbol				0	5. Relationship of Reporting Person(s) to Issuer			
			MAGELLAN HEALTH INC [MGLN]					(Check all applicable)			
(Mo			(Month/I	/onth/Dav/Year)				_X_ Director 10% Owner _X_ Officer (give title Other (specify below) below) Chief Executive Officer			
AVON, CT	(Street)			endment, D onth/Day/Yea	-	ıl	-	5. Individual or Joi Applicable Line) _X_ Form filed by Ou Form filed by Mo Person	nt/Group Filin	g(Check rson	
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative	Secu		ired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	ed Date, if	3. Transactio Code (Instr. 8) Code V	4. Securit nor Dispos (Instr. 3, 4	ies Ac ed of (equired (A) (D)	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)	
Ordinary Common Stock, \$0.01 par value	02/01/2018			X <u>(1)</u>		. ,	\$ 51.79	42,807	D		
Ordinary Common Stock, \$0.01 par value	02/01/2018			S <u>(1)</u>	13,375	D	\$ 99.1974 (2)	29,432	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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)	4. 5. Number of Transactio/Derivative Code Securities (Instr. 8) Acquired (A) or Disposed of (D)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8 1 2 (
			Code V	(Instr. 3, 4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Options (right to buy)	\$ 51.79	02/01/2018	X <u>(1)</u>	13,375	<u>(3)</u>	02/01/2023	Common Stock	13,375	

Reporting Owners

Reporting Owner Name / Addres	Relationships						
	Director	10% Owner	Officer	Other			
SMITH BARRY M 55 NOD ROAD AVON, CT 06001	Х		Chief Executive Officer				
Signatures							
/s/ Barry M. Smith	02/01/2018						

Reporting Person

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Date

- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) This transaction was effectuated pursuant to a Rule 10b-5-1 Plan.

The number of securities reported represents an aggregate number of shares sold in multiple open market transactions at prices ranging from \$96.40 to \$100.00, inclusive. The price reported represents the weighted average price. The Reporting Person undertakes to provide

- (2) staff of the SEC, the issuer, or a stockholder of the issuer, upon request, the number of shares sold by the Reporting Person at each separate price within the range.
- (3) All of the stock options in this tranche have vested in full.
- (4) Not applicable.

**Signature of

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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.