Edgar Filing: Witz Pascale - Form 4

| Form 4 | | | | | | | | | | |
|--|---|---------|--|---------------------------------------|--------------------------------------|---------------------|--|---|--------------------------|--|
| November 07, 2018 FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). 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 | | | | | | | Number:3235-0287Number:January 31, 2005Expires:2005Estimated average burden hours per response0.5 | | | |
| (Print or Type I | Responses) | | | | | | | | | |
| Witz Pascale Symbol | | | suer Name an ol KINELMEI | | | 0 | 5. Relationship of Reporting Person(s) to Issuer | | | |
| (Last) (First) (Middle) 3. Date of (Month/D 940 WINTER STREET 11/06/20 (Street) 4. If Ame | | | e of Earliest Transaction h/Day/Year) 5/2018 | | | | X Director | title $\frac{10\%}{\text{below}}$ | Owner | |
| | | | .mendment, D Month/Day/Yea | - | ıl | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting | | | |
| (City) | | (Zip) T | able I - Non-l | Derivative | Secur | | Person iired, Disposed of | , or Beneficiall | v Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | | 3. if Transactio Code r) (Instr. 8) | 4. Securi on(A) or D (Instr. 3, | ties Adisposed 4 and (A) or | cquired d of (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 | |
| Common Stock | 11/06/2018 | | S S | Amount 2,206 | (D) D | \$ 83.615 | 1,661 | 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)

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| 1. Title of Derivative | 2. Conversion | 3. Transaction Date (Month/Day/Year) | | 4. Transactio | 5. orNumber | 6. Date Exer Expiration D | | 7. Title and Amount of | 8. Price of Derivative | 9. Nu Deriv |
|---------------------------|---|---|-------------------------|--------------------|--|------------------------------|---|---|---|----------------|
| Security (Instr. 3) | or Exercise Price of Derivative Security | | any (Month/Day/Year) | Code (Instr. 8) | of (Month/Day/Year) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | Underlying Securities (Instr. 3 and | Security (Instr. 5) 4) | Secur Bene Owne Follo Repo Trans (Instr | |
| | | | | Code V | (A) (D |) Date Exercisable | Expiration Date | Title Amou or Numb of Share | ber | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|--|---------------|------------|---------|-------|--|--|--|
| | Director | 10% Owner | Officer | Other | | | |
| Witz Pascale 940 WINTER STREET WALTHAM, MA 02451 | Х | | | | | | |
| Signatures | | | | | | | |
| /s/ John L. Healy (POA on file) Witz | ale | 11/07/2018 | | | | | |
| ** Signature of Reporting Per | | 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).

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.