#### Edgar Filing: Leicher Bruce - Form 4

Leicher Bruc	e											
Form 4												
May 25, 201	2											
FORM	14										PPROVAL	
	UNITE	O STATES				ND EXC D.C. 205		NGE (	COMMISSION	OMB Number:	3235-0287	
Check thi if no long subject to Section 1 Form 4 of Form 5 obligation may cont <i>See</i> Instru 1(b).	6. r Filed pr ns inue.	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							January 31, Expires: 2005 Estimated average burden hours per response 0.5			
(Print or Type F	Responses)											
Leicher Bruce Symbol MOMEN PHARM [MNTA] (Last) (First) (Middle) 3. Date of (Month/Da 675 WEST KENDALL ST 05/23/20 (Street) 4. If Amer			Symbol MOMEN PHARM	2. Issuer Name <b>and</b> Ticker or Trading Symbol MOMENTA PHARMACEUTICALS INC [MNTA] 3. Date of Earliest Transaction (Month/Day/Year) 05/23/2012					<ul> <li>5. Relationship of Reporting Person(s) to Issuer</li> <li>(Check all applicable)</li> <li> Director 10% Owner</li> <li>X_ Officer (give title 0ther (specify below) SVP &amp; General Counsel</li> <li>6. Individual or Joint/Group Filing(Check Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ul>			
			3. Date of (Month/D									
			mendment, Date Original Ionth/Day/Year)									
CAMBRID	GE, MA 02142									More than One Re		
(City)	(State)	(Zip)	Table	e I - Nor	n-De	erivative S	Securi	ties Acc	quired, Disposed of	f, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	ar) Executio any		Code (Instr.	8)	n(A) or Di (D)	spose	d of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock	05/23/2012			S <u>(1)</u>		189	D	\$ 13.9	101,216	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 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. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Securi (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date		Amount or Number of Shares		

# **Reporting Owners**

Reporting Owner Name / Address	Relationships								
	Director	10% Owner	Officer	Other					
Leicher Bruce 675 WEST KENDALL ST CAMBRIDGE, MA 02142			SVP & General Counsel						
Signatures									
Davios Loisbon 05	125/2012								

### Bruce Leicher 05/25/2012

<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) This sale was effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on August 27, 2008.

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.