## Edgar Filing: NxStage Medical, Inc. - Form 4

NxStage Me Form 4	dical, Inc.										
November 1	7, 2014										
FORM	14										
	UNITEL	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								3235-0287	
Check th if no long subject to Section 1 Form 4 c	ger <b>STATE</b> 16.	DOX									
Form 5 obligatio may cont <i>See</i> Instr 1(b).	tinue. Section 17	response 0. 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									
(Print or Type I	Responses)										
1. Name and Address of Reporting Person <u>*</u> Swan Winifred L			2. Issuer Name <b>and</b> Ticker or Trading Symbol NxStage Medical, Inc. [NXTM]					5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Check					ck all applicable)			
(Mo				Day/Year) 014				Director 10% Owner X_ Officer (give title Other (specify below) SVP and General Counsel			
	(Street)	et) 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					
LAWRENC	CE, MA 01843							Form filed by M Person			
(City)	(State)	(Zip)	Tabl	le I - Non-D	erivative s	Securi	ities Acqu	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year	Yansaction Date 2A. Deemed onth/Day/Year) Execution Da any (Month/Day/		3. Transactio Code (Instr. 8)	4. Securit on(A) or Dis (Instr. 3, 4	sposed	l of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	11/14/2014			Code V M	Amount 16,667	(D) A	Price \$ 14.44	(Instr. 3 and 4) 36,355	D		
Common Stock	11/14/2014			S <u>(1)</u>	17,167	D	\$ 17.37	19,188	D		

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

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 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. Transactio Code (Instr. 8)	5. Number of tiorDerivative Securities ) 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)	\$ 14.44	11/14/2014		М		16,667	01/07/2008	12/06/2014	Common Stock	16,667

## **Reporting Owners**

Reporting Owner Name / Address			Relationships		
	Director 10% Owner		Officer	Other	
Swan Winifred L C/O NXSTAGE MEDICAL, INC. 350 MERRIMACK STREET LAWRENCE, MA 01843			SVP and General Counsel		
Signatures					
/s/ Aras Lapinskas, attorney-in-fact	for Winif	red			
Swan			11/17/2014		
<b>**</b> Signature of Reporting Persor	ı		Date		
<b>Explanation of Resp</b>	onse	s:			

\* 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 March 14, 2014.

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.