FORM 4

obligations may continue. See

Instruction 1(b)

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to Section 16. Form 4 or Form 5

OMB APP	ROVAL
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Davidson David															all appli Directo	cable)	109	Person(s) to Issuer 10% Owner Other (specify	
	(F JEBIRD BI OND STRI	IO, INC.	(Middle))	10/	3. Date of Earliest Transaction (Month/Day/Year) 10/15/2015								X	Chief Medical Officer				
(Street) CAMBR (City)			02141 (Zip)		- 4. ľ	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)	,				
		Tab	le I - N	Non-Deriv	ative	Sec	uriti	ies A	cquire	ed, D	isposed o	of, or B	enefi	cially	Owned	ı			
Date		2. Transacti Date (Month/Day		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an			Benefic Owned		ies :ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Inc Bene Own	direct eficial ership			
								Code	v	Amount	(A) or (D)	Price		Reporte Transac (Instr. 3	tion(s)		(Inst	r. 4)	
Common Stock 10/1			10/15/20	015	15			М		2,000	A	\$2	.09	2,	2,000				
Common Stock 10/15			10/15/20	015	15			S ⁽¹⁾		575	D	\$78.9	\$78.9879(2)		1,425				
Common Stock 10/15/20			015	15		S ⁽¹⁾		1,329	D	\$79.9	\$79.9216 ⁽³⁾		96						
Common Stock 10/15/20			015	15			S ⁽¹⁾		96	D	\$80	.89(4)	0		D				
		Т	able I								sposed of , converti				wned		,	,	
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security		3. Transaction Date (Month/Day/Year)	if any	emed tion Date,	Date, Transa Code (5. Numbe		6. Date	e Exer	cisable and	7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		8. De Se	Price of erivative ecurity istr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	Ownersh Form: y Direct (D) or Indirect (I) (Instr.	ship of Be (D) Ov ect (In	1. Nature f Indirect Beneficial Dwnership nstr. 4)
Cural					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amo or Num of Shar						
Stock Option (right to	\$2.09	10/15/2015			M		2,000		(5)		04/13/2022	Commo Stock	n 2,0	00	\$0.00	41,239) D		

Explanation of Responses:

- $1.\ The\ sales\ reported\ in\ this\ Form\ 4\ were\ effected\ pursuant\ to\ a\ Rule\ 10b5-1\ trading\ plan\ adopted\ by\ the\ reporting\ person\ on\ January\ 14,\ 2015.$
- 2. The range of prices for the transaction reported on this line was \$78.51 to \$79.50. The average weighted price was \$78.9879. The reporting person will provide, upon request by the SEC, the issuer or a security holder of the issuer, full information regarding the number of shares sold at each separate price.
- 3. The range of prices for the transaction reported on this line was \$79.52 to \$80.43. The average weighted price was \$79.9216. The reporting person will provide, upon request by the SEC, the issuer or a security holder of the issuer, full information regarding the number of shares sold at each separate price.
- 4. The range of prices for the transaction reported on this line was \$80.84 to \$80.99. The average weighted price was \$80.89. The reporting person will provide, upon request by the SEC, the issuer or a security holder of the issuer, full information regarding the number of shares sold at each separate price.
- 5. This option vests over a four-year period, at a rate of twenty-five percent (25%) on February 13, 2013 and in 36 equal monthly installments thereafter.

Remarks:

buv)

/s/Jason F. Cole, Attorney-in-10/19/2015 Fact

** Signature of Reporting Person

Date

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

- * 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.

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 Number.