## Edgar Filing: Cohen Matthew Lessner - Form 4

Cohen Mattl	hew Lessner										
Form 4											
May 02, 201	8										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB AF	PROVAL	
<b>UNITED STATES SECURITIES AND EXCHANGE COMMISSION</b> Washington, D.C. 20549									OMB Number:	3235-0287	
Check th				8 /	·				Expires:	January 31,	
if no lon subject to		AENT OF	F CHAN	<b>IGES IN</b>	BENEF	ICIA	LOWN	ERSHIP OF	200		
Section 1				SECUR	RITIES			Estimated average burden hours per			
Form 4 of	or								response 0.5		
Form 5	<b>1</b> 00						•	Act of 1934,			
obligatio may con				•	•	- ·		1935 or Section	l		
See Instr		30(h)	of the Ir	vestment	Compan	y Ac	t of 1940				
1(b).											
(Print or Type	Responses)										
1. Name and Address of Reporting Person *2. IssueCohen Matthew LessnerSymbol								5. Relationship of Reporting Person(s) to Issuer			
			-	C. [PTC]							
(Last)	(First) (I	Middle)						(Check	all applicable	2)	
(Last)	(11181) (1	vildule)		f Earliest Ti Day/Year)	ransaction			Director	10%	Owner	
140 KENDRICK STREET 05/02/2				-			-	Officer (give title Other (specify			
			0070272	010			t	below) EVP E	below) ield Operation	16	
	(0,)					_			-		
(Street) 4. If Ame Filed(Mon								6. Individual or Joint/Group Filing(Check			
				nth/Day/Yeai	r)			Applicable Line) _X_ Form filed by One Reporting Person			
NEEDHAM	1, MA 02494						-	Form filed by Mo Person			
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Secur	ities Acqui	ired, Disposed of,	or Beneficial	ly Owned	
1.Title of	2. Transaction Date	2A. Deem	ed	3.				5. Amount of	6.	7. Nature of	
Security	(Month/Day/Year)	Execution	Date, if		or Dispos			Securities	Ownership	Indirect	
(Instr. 3)		any (Month/Da	av/Year)	Code (Instr. 8)	(Instr. 3, 4	and 5	))	Beneficially Owned	Form: Direct (D)	Beneficial Ownership	
		(month/D)	uy, reur)	(Instr. 0)				Following	or Indirect	(Instr. 4)	
						(A)		Reported	(I)		
						or		Transaction(s) (Instr. 3 and 4)	(Instr. 4)		
				Code V	Amount	(D)	Price	(111su. 5 and 4)			
Common					1 - 6 - 6	-	\$		-		
Stock	05/02/2018			S	17,000	D	84.001	28,371	D		
							(1)				

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)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,	Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	4, and 5)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Cohen Matthew Lessner 140 KENDRICK STREET NEEDHAM, MA 02494			EVP, Field Operations					
Signatures								
/s/Catherine Gorecki by power of attorney filed 4/2/2014			05/02/2018					
**Signature of Reporting	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).

This transaction was executed in multiple trades at prices ranging from \$84.00 to \$84.02. The price reported above reflects the weighted (1) average purchase price. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.

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.