Radius Health, Ind	с.									
Form 4 February 12, 2016	5									
									PPROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSIO Washington, D.C. 20549								NOMB Number:	3235-0287	7
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. <i>See</i> Instruction 1(b).	WNERSHIP OF nge Act of 1934, of 1935 or Sectio 940	Estimated burden hou response	urs per	5						
(Print or Type Respon	ises)									
1. Name and Address of Reporting Person <u>*</u> Roychowdhury Debasish			2. Issuer Name and Ticker or Trading Symbol Radius Health, Inc. [RDUS]			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) (First) (Middle) C/O RADIUS HEALTH, INC., 950			3. Date of Earliest Transaction (Month/Day/Year) 02/10/2016			Officer (give title Other (specify below) below)				
WINTER ST.							Delow)	Delow)		
			(Month/Day/Year) Appli _X_H			Applicable Line) _X_ Form filed by	dividual or Joint/Group Filing(Check icable Line) Form filed by One Reporting Person Form filed by More than One Reporting			
WALTHAM, MA	A 02145						Person	More than One R	eporting	
(City) (S	State)	(Zip)	Tab	le I - Non-l	Derivative	Securities A	cquired, Disposed o	of, or Beneficia	lly Owned	
	nsaction Date th/Day/Year)	2A. Deemo Execution any (Month/Da	Date, if	3. Transactio Code (Instr. 8) Code V	4. Securiti nAcquired Disposed (Instr. 3, 4 Amount	(A) or of (D)	Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.										
Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02) 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	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of	8
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities	D
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	S

(Instr. 3)	Price of Derivative Security	(Month/Day/Year)	(Instr. 8)	or Dispos (D)	(Instr. 3, 4,				(
			Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (Right to Buy)	\$ 29.89	02/10/2016	A	27,500		<u>(1)</u>	02/09/2026	Common Stock	27,500

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Roychowdhury Debasish C/O RADIUS HEALTH, INC. 950 WINTER ST. WALTHAM, MA 02145	Х							
Signatures								
/s/ B. Nicholas Harvey, Attorney-in-fact		02/12/2	016					

**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) The option vests in full on February 10, 2017, subject to continued service to the Company through such date.

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.

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