#### MAGELLAN HEALTH SERVICES INC

Form 4 May 17, 2007

### FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB** Number:

3235-0287

0.5

January 31, Expires: 2005

**OMB APPROVAL** 

Estimated average

burden hours per response...

5. Relationship of Reporting Person(s) to

(Cl- - -1- -11 - - -1: - -1-1-)

Issuer

Form 4 or Form 5 obligations may continue. See Instruction

Check this box

if no longer

subject to

Section 16.

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

2. Issuer Name and Ticker or Trading

MAGELLAN HEALTH SERVICES

Symbol

1(b).

(Print or Type Responses)

SHULMAN STEVEN J

1. Name and Address of Reporting Person \*

			INC [MGLN]			TCLS	(Check all applicable)			
(Last) 55 NOD RO	(First)	(Middle)	3. Date of (Month/E) 05/15/2	•			X Director X Officer (give below)		Owner er (specify	
(Street) 4. If Amer			ndment, Date Original hth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting			
AVON, CT	06001							Person	1010 1111111 0110 110	porung
(City)	(State)	(Zip)	Tabl	le I - Non-D	Derivative	Secur	ities Acqu	iired, Disposed of	f, or Beneficial	ly Owned
1.Title of Security (Instr. 3)  Ordinary Common Stock, \$0.01 par value	2. Transaction Day/Year (Month/Day/Year) 05/15/2007	r) Execution	med on Date, if Day/Year)	3. Transactic Code (Instr. 8)  Code V	4. Securit or(A) or Di (Instr. 3, 4) Amount	sposed 4 and : (A) or	of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Ordinary Common Stock, \$0.01 par value	05/15/2007			S <u>(1)</u>	100	D	\$ 45.71	128,507	D	
Ordinary Common	05/15/2007			S <u>(1)</u>	800	D	\$ 45.7	127,707	D	

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Stock, \$0.01 par value							
Ordinary Common Stock, \$0.01 par value	05/15/2007	S <u>(1)</u>	200	D	\$ 45.69	127,507	D
Ordinary Common Stock, \$0.01 par value	05/15/2007	S <u>(1)</u>	800	D	\$ 45.64	126,707	D
Ordinary Common Stock, \$0.01 par value	05/15/2007	S <u>(1)</u>	1,100	D	\$ 45.63	125,607	D
Ordinary Common Stock, \$0.01 par value	05/15/2007	S <u>(1)</u>	500	D	\$ 45.6	125,107	D
Ordinary Common Stock, \$0.01 par value	05/15/2007	S <u>(1)</u>	100	D	\$ 45.59	125,007	D
Ordinary Common Stock, \$0.01 par value	05/15/2007	S <u>(1)</u>	900	D	\$ 45.58	124,107	D
Ordinary Common Stock, \$0.01 par value	05/15/2007	S <u>(1)</u>	100	D	\$ 45.56	124,007	D
Ordinary Common Stock, \$0.01 par value	05/15/2007	S <u>(1)</u>	100	D	\$ 45.51	123,907	D
Ordinary Common Stock,	05/15/2007	S(1)	11,813	D	\$ 45.5	112,094	D

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\$0.01 par value

Ordinary

Common Stock, 0.01 05/15/2007 S $\underline{(1)}$  19,662 D \$ 45 92,432 D

par value

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.

SEC 1474

(9-02)

9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

Shares

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Tit Deriv Secur (Instr	ative ity	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. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Under Secur	rlying	8. Price of Derivative Security (Instr. 5)	
							Date Exercisable	Expiration Date	Title	Amount or Number of		

Code V (A) (D)

# **Reporting Owners**

Reporting Owner Name / Address	Relationships
Reporting Owner Maine / Address	

Director 10% Owner Officer Other

SHULMAN STEVEN J

55 NOD ROAD X Chairman and CEO

AVON, CT 06001

# **Signatures**

/s/ Steven J Shulman 05/16/2007

\*\*Signature of Date
Reporting Person

Reporting Owners 3

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# **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 transaction was effectuated pursuant to a Rule 10b-5-1 plan and, accordingly, not on a discretionary basis by the reporting person. 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.