## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

ı	UMB APPRO	JVAL							
	OMB Number:	3235-0287							
	Estimated average burden								
	hours per response:	0.5							

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

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1. Name and Address of Reporting Person*  FOOTE SUSAN BARTLETT  (Last) (First) (Middle)  400 WOOD ROAD									cker or Trad			(Ch	Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner								
						Date (7/21/2		t Trar	nsaction (Mo	nth/[	Day/Year)		Officer below)	(give title		Other (specify below)					
(Street) BRAINTREE MA 02184				_   4. I _	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person							
(City) (State) (Zip)															r 613011						
1. Title of Security (Instr. 3)  2. Transa Date (Month/D				saction	2A. Deemed Execution Date,			Code (Instr.   5)			A) or	or 5. Amount of		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership					
								Code V		Amount	(	A) or D)	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)			
Common	Stock			07/2	1/201	1			A		944(1	) A \$		\$0.0	1 4,1	45 <sup>(2)</sup>	D				
		-	Table II - I )						quired, D s, option						Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day	d Date,	4. Transaction Code (Instr. 8)		5. Number of		6. Date Exercisal Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	OI Ni Of	umber							
Non- Qualified Stock Option (right to buy)	\$68.81	07/21/2011			A		3,559		07/21/2012	(3)	07/21/2018	Comi Sto		,559	\$68.81	3,559		D			
Non- Qualified Stock Option (right to buy)	\$49.92								08/01/2008	(3)	08/01/2014	Comi Sto		,592		4,592		D			
Non- Qualified Stock Option (right to buy)	\$52.76								05/05/2006	(4)	05/05/2013	Comr Sto		,000		6,000		D			
Non- Qualified Stock Option (right to buy)	\$54.48								07/29/2011	(3)	07/29/2017	Comr Sto		,290		4,290		D			
Non- Qualified Stock Option (right to buy)	\$58.46								07/31/2009	(3)	07/31/2018	Comi		,664		5,664		D			
Non- Qualified Stock Option (right to	\$59.44								07/30/2010	(3)	07/30/2016	Comr		,879		5,879		D			

## **Explanation of Responses:**

- 1. Restricted Stock Unit Grant which vest 100% on the first anniversary of the grant date. Grant was made under 2005 Long Term Incentive Compensation Plan.
- 2. Total includes Restricted Stock Awards and/or Restricted Stock Units that are subject to restrictions until vesting requirements are met. Grant was made under 2005 Long Term Incentive Compensation Plan.
- 3. Grant to reporting person of right to buy shares of common stock exercisable 100 percent on the first anniversary of the date of grant.
- 4. Grant to reporting person of right to buy shares of common stock exercisable immediately.

## Susan Foote

\*\* Signature of Reporting Person

on Date

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

- $^{\star}$  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.