

# SECURITIES AND EXCHANGE COMMISSION

## FORM D

Official notice of an offering of securities that is made without registration under the Securities Act in reliance on an exemption provided by Regulation D and Section 4(6) under the Act.

Filing Date: **2013-01-10**  
SEC Accession No. [0001566539-13-000001](#)

([HTML Version](#) on [secdatabase.com](#))

### FILER

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**IRONWOOD PHARMACEUTICALS INC**

CIK: [1446847](#) | IRS No.: [043404176](#) | State of Incorporation: **DE**  
Type: **D** | Act: **33** | File No.: [021-189883](#) | Film No.: [13521730](#)  
SIC: **2834** Pharmaceutical preparations

Mailing Address  
*301 BINNEY STREET  
CAMBRIDGE MA 02142*

Business Address  
*301 BINNEY STREET  
CAMBRIDGE MA 02142  
617-621-7722*

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

OMB APPROVAL	
OMB Number:	3235-0076
Expires:	June 30, 2012
Estimated average burden	
hours per response:	4.00

Notice of Exempt Offering of Securities

1. Issuer's Identity

CIK (Filer ID Number) [0001446847](#) Previous Name(s)  None Entity Type  
 Corporation  
Name of Issuer [IRONWOOD PHARMACEUTICALS INC](#)  Limited Partnership  
 Limited Liability Company  
Jurisdiction of Incorporation/Organization [DELAWARE](#)  General Partnership  
 Business Trust  
 Other  
Year of Incorporation/Organization  
 Over Five Years Ago  
 Within Last Five Years (Specify Year)  
 Yet to Be Formed

2. Principal Place of Business and Contact Information

Name of Issuer [IRONWOOD PHARMACEUTICALS INC](#)  
Street Address 1 [301 BINNEY STREET](#) Street Address 2  
City [CAMBRIDGE](#) State/Province/Country [MASSACHUSETTS](#) ZIP/Postal Code [02142](#) Phone No. of Issuer [617-621-7722](#)

3. Related Persons

Last Name [CONRADES](#) First Name [GEORGE](#) Middle Name [H.](#)  
Street Address 1 [C/O IRONWOOD PHARMACEUTICALS, INC.](#) Street Address 2 [301 BINNEY STREET](#)  
City [CAMBRIDGE](#) State/Province/Country [MASSACHUSETTS](#) ZIP/Postal Code [02142](#)

Relationship:  Executive Officer  Director  Promoter

Clarification of Response (if Necessary)

Last Name [COOK, JR.](#) First Name [JOSEPH](#) Middle Name [C.](#)  
Street Address 1 [C/O IRONWOOD PHARMACEUTICALS, INC.](#) Street Address 2 [301 BINNEY STREET](#)  
City [CAMBRIDGE](#) State/Province/Country [MASSACHUSETTS](#) ZIP/Postal Code [02142](#)

CAMBRIDGE

MASSACHUSETTS

02142

Relationship:  Executive Officer  Director  Promoter

Clarification of Response (if Necessary)

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Last Name	First Name	Middle Name
EBERSMAN	DAVID	A.
Street Address 1	Street Address 2	
C/O IRONWOOD PHARMACEUTICALS, INC.	301 BINNEY STREET	
City	State/Province/Country	ZIP/Postal Code
CAMBRIDGE	MASSACHUSETTS	02142

Relationship:  Executive Officer  Director  Promoter

Clarification of Response (if Necessary)

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Last Name	First Name	Middle Name
FANUCCI	MARSHA	H.
Street Address 1	Street Address 2	
C/O IRONWOOD PHARMACEUTICALS, INC.	301 BINNEY STREET	
City	State/Province/Country	ZIP/Postal Code
CAMBRIDGE	MASSACHUSETTS	02142

Relationship:  Executive Officer  Director  Promoter

Clarification of Response (if Necessary)

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Last Name	First Name	Middle Name
HECHT	PETER	M.
Street Address 1	Street Address 2	
C/O IRONWOOD PHARMACEUTICALS, INC.	301 BINNEY STREET	
City	State/Province/Country	ZIP/Postal Code
CAMBRIDGE	MASSACHUSETTS	02142

Relationship:  Executive Officer  Director  Promoter

Clarification of Response (if Necessary)

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Last Name	First Name	Middle Name
HIGGINS	MICHAEL	J.
Street Address 1	Street Address 2	
C/O IRONWOOD PHARMACEUTICALS, INC.	301 BINNEY STREET	
City	State/Province/Country	ZIP/Postal Code
CAMBRIDGE	MASSACHUSETTS	02142

Relationship:  Executive Officer  Director  Promoter

Clarification of Response (if Necessary)

Last Name	First Name	Middle Name
MCGUIRE	TERRANCE	G.
Street Address 1	Street Address 2	
C/O IRONWOOD PHARMACEUTICALS, INC.	301 BINNEY STREET	
City	State/Province/Country	ZIP/Postal Code
CAMBRIDGE	MASSACHUSETTS	02142

Relationship:  Executive Officer  Director  Promoter

Clarification of Response (if Necessary)

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Last Name	First Name	Middle Name
ROBERTS	BRYAN	E.
Street Address 1	Street Address 2	
C/O IRONWOOD PHARMACEUTICALS, INC.	301 BINNEY STREET	
City	State/Province/Country	ZIP/Postal Code
CAMBRIDGE	MASSACHUSETTS	02142

Relationship:  Executive Officer  Director  Promoter

Clarification of Response (if Necessary)

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Last Name	First Name	Middle Name
SHAW	DAVID	E.
Street Address 1	Street Address 2	
C/O IRONWOOD PHARMACEUTICALS, INC.	301 BINNEY STREET	
City	State/Province/Country	ZIP/Postal Code
CAMBRIDGE	MASSACHUSETTS	02142

Relationship:  Executive Officer  Director  Promoter

Clarification of Response (if Necessary)

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Last Name	First Name	Middle Name
WALSH	CHRISTOPHER	T.
Street Address 1	Street Address 2	
C/O IRONWOOD PHARMACEUTICALS, INC.	301 BINNEY STREET	
City	State/Province/Country	ZIP/Postal Code
CAMBRIDGE	MASSACHUSETTS	02142

Relationship:  Executive Officer  Director  Promoter

Clarification of Response (if Necessary)

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#### 4. Industry Group

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- Agriculture
- Banking & Financial Services
  - Commercial Banking
  - Insurance
  - Investing
  - Investment Banking
  - Pooled Investment Fund
  - Other Banking & Financial Services
- Business Services
- Energy
  - Coal Mining
  - Electric Utilities
  - Energy Conservation
  - Environmental Services
  - Oil & Gas
  - Other Energy
- Health Care
  - Biotechnology
  - Health Insurance
  - Hospitals & Physicians
  - Pharmaceuticals
  - Other Health Care
- Manufacturing
- Real Estate
  - Commercial
  - Construction
  - REITS & Finance
  - Residential
  - Other Real Estate
- Retailing
- Restaurants
- Technology
  - Computers
  - Telecommunications
  - Other Technology
- Travel
  - Airlines & Airports
  - Lodging & Conventions
  - Tourism & Travel Services
  - Other Travel
- Other

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#### 5. Issuer Size

- | Revenue Range   | Aggregate Net Asset Value Range                       |
|---|---|
| <input type="checkbox"/> No Revenues<br>\$1 - \$1,000,000 | <input type="checkbox"/> No Aggregate Net Asset Value |
| <input type="checkbox"/> \$1,000,001 - \$5,000,000        | <input type="checkbox"/> \$1 - \$5,000,000            |
| <input type="checkbox"/> \$5,000,001 - \$25,000,000       | <input type="checkbox"/> \$5,000,001 - \$25,000,000   |
| <input type="checkbox"/> \$25,000,001 - \$100,000,000     | <input type="checkbox"/> \$25,000,001 - \$50,000,000  |
| <input type="checkbox"/> Over \$100,000,000               | <input type="checkbox"/> \$50,000,001 - \$100,000,000 |
| <input checked="" type="checkbox"/> Decline to Disclose   | <input type="checkbox"/> Over \$100,000,000           |
| <input type="checkbox"/> Not Applicable                   | <input type="checkbox"/> Decline to Disclose          |
|   | <input type="checkbox"/> Not Applicable               |

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#### 6. Federal Exemption(s) and Exclusion(s) Claimed (select all that apply)

- Rule 504(b)(1) (not (i), (ii) or (iii))
- Rule 504 (b)(1)(i)
- Rule 504 (b)(1)(ii)
- Rule 504 (b)(1)(iii)
- Rule 505
- Rule 506
- Securities Act Section 4(6)
- Investment Company Act Section 3(c)
  - Section 3(c)(1)
  - Section 3(c)(2)
  - Section 3(c)(3)
  - Section 3(c)(4)
  - Section 3(c)(5)
  - Section 3(c)(6)
  - Section 3(c)(7)
  - Section 3(c)(9)
  - Section 3(c)(10)
  - Section 3(c)(11)
  - Section 3(c)(12)
  - Section 3(c)(13)
  - Section 3(c)(14)

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#### 7. Type of Filing

- New Notice Date of First Sale [2013-01-04](#)
- First Sale Yet to Occur

Amendment

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### 8. Duration of Offering

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Does the Issuer intend this offering to last more than one year?  Yes  No

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### 9. Type(s) of Securities Offered (select all that apply)

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- |  |   |
|--|---|
| <input type="checkbox"/> Pooled Investment Fund Interests  | <input type="checkbox"/> Equity   |
| <input type="checkbox"/> Tenant-in-Common Securities   | <input checked="" type="checkbox"/> Debt  |
| <input type="checkbox"/> Mineral Property Securities   | <input type="checkbox"/> Option, Warrant or Other Right to Acquire Another Security |
| <input type="checkbox"/> Security to be Acquired Upon Exercise of Option, Warrant or Other Right to Acquire Security | <input type="checkbox"/> Other (describe)   |

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### 10. Business Combination Transaction

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Is this offering being made in connection with a business combination transaction, such as a merger, acquisition or exchange offer?  Yes  No

Clarification of Response (if Necessary)

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### 11. Minimum Investment

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Minimum investment accepted from any outside investor \$ 0 USD

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### 12. Sales Compensation

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Recipient	Recipient CRD Number <input type="checkbox"/> None	
MORGAN STANLEY & CO. LLC	8209	
(Associated) Broker or Dealer <input checked="" type="checkbox"/> None	(Associated) Broker or Dealer CRD Number <input checked="" type="checkbox"/> None	
None	None	
Street Address 1	Street Address 2	
1585 BROADWAY		
City	State/Province/Country	ZIP/Postal Code
NEW YORK	NEW YORK	10036
State(s) of Solicitation <input type="checkbox"/> All States	<input checked="" type="checkbox"/> Foreign/Non-US	

- NEW JERSEY
- NEW YORK
- NEW MEXICO
- MISSOURI
- MASSACHUSETTS

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### 13. Offering and Sales Amounts

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Total Offering Amount \$ 175,000,000 USD or  Indefinite  
Total Amount Sold \$ 175,000,000 USD  
Total Remaining to be Sold \$ 0 USD or  Indefinite

Clarification of Response (if Necessary)

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#### 14. Investors

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- Select if securities in the offering have been or may be sold to persons who do not qualify as accredited investors,   
Number of such non-accredited investors who already have invested in the offering

Regardless of whether securities in the offering have been or may be sold to persons who do not qualify as accredited investors, enter the total number of investors who already have invested in the offering:

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#### 15. Sales Commissions & Finders' Fees Expenses

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Provide separately the amounts of sales commissions and finders' fees expenses, if any. If the amount of an expenditure is not known, provide an estimate and check the box next to the amount.

Sales Commissions \$ 7,015,908 USD  Estimate

Finders' Fees \$ 0 USD  Estimate

Clarification of Response (if Necessary)

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#### 16. Use of Proceeds

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Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.

\$ 0 USD  Estimate

Clarification of Response (if Necessary)

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#### Signature and Submission

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**Please verify the information you have entered and review the Terms of Submission below before signing and clicking SUBMIT below to file this notice.**

##### Terms of Submission

In submitting this notice, each Issuer named above is:

- Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, the information furnished to offerees.
- Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State in which the Issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against it in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.
- Certifying that the Issuer is not disqualified from relying on any Regulation D exemption it has identified in Item 6 above for one of the reasons stated in Rule 505(b)(2)(iii).

Each Issuer identified above has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

Issuer	Signature	Name of Signer	Title	Date
IRONWOOD PHARMACEUTICALS INC	HALLEY GILBERT	HALLEY GILBERT	GENERAL COUNSEL	2013-01-10

*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.*

\* This undertaking does not affect any limits Section 102(a) of the National Securities Markets Improvement Act of 1996 ("NSMIA") [Pub. L. No. 104-290, 110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to require information. As a result, if the securities that are the subject of this Form D are "covered securities" for purposes of NSMIA, whether in all instances or due to the nature of the offering that is the subject of this Form D, States cannot routinely require offering materials under this undertaking or otherwise and can require offering materials only to the extent NSMIA permits them to do so under NSMIA's preservation of their anti-fraud authority.

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