Medidata Solutions, Inc. Form 4

Check this box

if no longer

subject to

Section 16.

Form 4 or

obligations

Form 5

February 25, 2014

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

3235-0287

Expires:

January 31, 2005

0.5

Estimated average burden hours per

OMB APPROVAL

response...

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

may continue. See Instruction 30(h) of the Investment Company Act of 1940

1(b).

(Last)

(City)

(Print or Type Responses)

1. Name and Address of Reporting Person * **Douglas Cory**

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to Issuer

Medidata Solutions, Inc. [MDSO] 3. Date of Earliest Transaction

(Check all applicable)

C/O MEDIDATA SOLUTIONS.

(First)

(Month/Day/Year) 02/21/2014

Director 10% Owner Other (specify X_ Officer (give title below)

INC., 350 HUDSON STREET, 9TH **FLOOR**

(State)

Chief Financial Officer

(Street) 4. If Amendment, Date Original

(Zip)

(Middle)

6. Individual or Joint/Group Filing(Check

Filed(Month/Day/Year) Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting

NEW YORK, NY 10014

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| | | | | | | _ | - | | - |
|--------------------------------------|---|---|-------------|---------------|-----|--|--|---|---|
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 3. 4. Securities Acquired (A) Transaction Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or | | | | 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) | |
| Common Stock | 02/21/2014 | | Code V M | Amount 17,561 | (D) | Price \$ 8.22 | 184,200 | D | |
| Common Stock | 02/21/2014 | | S | 17,561 | D | \$ 64.4286 (1) | 166,639 | D | |

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

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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) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transactic Code (Instr. 8) | 5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | |
|---|---|---|---|--|---|--|--------------------|---|-------------------------------------|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares |
| Stock Option (Right to buy) | \$ 8.22 | 02/21/2014 | | M | 17,561 | (2) | 10/01/2021 | Common Stock | 17,561 |

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Douglas Cory

C/O MEDIDATA SOLUTIONS, INC. 350 HUDSON STREET, 9TH FLOOR NEW YORK, NY 10014

Chief Financial Officer

Signatures

/s/ Michael I. Otner, Attorney-in-Fact

02/25/2014

**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).
- Such transaction was executed in multiple trades at prices ranging from \$64.45 to \$. The price reported reflects the weighted average sale (1) 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.
- (2) The options vested as to 25% of the shares on October 1, 2012 and 1/36th of the remaining options will become exercisable each month thereafter for the next 36 months.

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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