### Edgar Filing: HAEMONETICS CORP - Form 4

HAEMONE	ETICS CORP										
Form 4	_										
July 21, 201											
FORM	<b>14</b>	CT A TEC	CECU	DITIES	A NID EV		NCE CO	MMISSION		PPROVAL	
		SIAIES		shington			ANGE CC	DMMISSION	OMB Number:	3235-0287	
Check the					., 2101 -				Expires:	January 31,	
if no lon subject t		MENT O	F CHANGES IN BENEFICIAL OWNERSHIP OF						Estimated average		
Section				SECURITIES					burden hours per		
Form 4									response	0.5	
Form 5 obligation	<b>nn</b> a -						-	Act of 1934,			
may cor				•	•	-	•	935 or Section	1		
See Inst	ruction	30(n)	of the fi	nvestmen	t Compa	ny Ao	ct of 1940				
1(b).											
(Print or Type	Responses)										
1. Name and	Address of Reporting	Person *	2 Issue	er Name <b>an</b>	<b>d</b> Ticker o	r Trad	ing 5	. Relationship of I	Reporting Pers	son(s) to	
				a runne un	u Heker o	i iiuu	B	Issuer			
		Symbol HAEMONETICS CORP [HAE]				E]	(Check all applicable)				
(Last)	(First)	(Middle)	3. Date c	of Earliest 7	ransactior	1		(Check	c all applicable	e)	
400 WOOD ROAD			(Month/Day/Year)				-	Director 10% Owner			
			07/20/2015					X_ Officer (give title Other (specify below) below)			
							U	CFO & EVP I		lopment	
	(Street)		4. If Am	endment, D	ate Origin	al	6	. Individual or Joi	nt/Group Filir	g(Check	
			Filed(Mc	onth/Day/Yea	ar)		A	Applicable Line)			
							-	X_Form filed by O Form filed by M			
BRAINTR	EE, MA 02184						F	erson		porting	
(City)	(State)	(Zip)	Tab	ole I - Non-	Derivative	e Secu	rities Acqui	red, Disposed of,	or Beneficial	ly Owned	
1.Title of	2. Transaction Date	e 2A. Deen	ned	3.			cquired (A)	5. Amount of	6.	7. Nature of	
Security	(Month/Day/Year)	Executior	n Date, if	Code (Instr. 3, 4 and 5)				Securities	Ownership	Indirect	
(Instr. 3)		any (Month/D	av/Year)					Beneficially Owned	Form: Direct (D)	Beneficial Ownership	
		(intointii) D	uj, 10ui)	(111511:0)				Following	or Indirect	(Instr. 4)	
						(A)		Reported Transaction(s)	(I) (Instr. 4)		
				~		or		(Instr. 3 and 4)	(Instr. 4)		
Common				Code V	Amount 4,902	(D)	Price				
Stock	07/20/2015			Μ	4,902 (1)	А	\$ 26.315	43,090	D		
					_		¢				
Common Stock	07/20/2015			S	4,902 (1)	D	\$ 39.0882	38,188	D		

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.

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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. Transactio Code (Instr. 8)	5. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisab Expiration Date (Month/Day/Year		7. Title and A Underlying S (Instr. 3 and 4	leci
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Ai or Ni of Sh
Non-Qualified Stock Option (right to buy)	\$ 26.315	07/20/2015		М	4,902 (1)	10/23/2009(2)	10/23/2015	Common Stock	4

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
LINDOP CHRISTOPHER J 400 WOOD ROAD BRAINTREE, MA 02184			CFO & EVP Business Development				
Signatures							
By: Alexander Steffan For: Ch Lindop	ristopher	(	07/21/2015				

\*\*Signature of Reporting Person

### **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) Pursuant to a 10b5-1 Plan.
- (2) Grant to reporting person of right to buy shares of common stock vesting in annual increments over a 5 year period beginning on the first anniversary of the date of grant.

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.