

BIOMET INC
Form 4
January 03, 2006

FORM 4

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

OMB APPROVAL

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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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type Responses)

1. Name and Address of Reporting Person *
ENGLAND GARRY L

(Last) (First) (Middle)
1031 COUNTRY CLUB LANE
(Street)

WARSAW, IN 46580

(City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol
BIOMET INC [BMET]

3. Date of Earliest Transaction
(Month/Day/Year)
01/02/2006

4. If Amendment, Date Original Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

___ Director ___ 10% Owner
 Officer (give title below) ___ Other (specify below)
Sr Vice President - / Warsaw Operations

6. Individual or Joint/Group Filing(Check Applicable Line)
 Form filed by One Reporting Person
___ Form filed by More than One Reporting Person

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

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Ownership (Instr. 4)
				(A) or (D)	Code V Amount (D) Price		

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

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SEC 1474
(9-02)

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

1. Title of Derivative Security	2. Conversion or Exercise	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any	4. Transaction Code	5. Number of Derivative Securities	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)
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(Instr. 3)	Price of Derivative Security	(Month/Day/Year)	(Instr. 8)	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)						
			Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stck Option	\$ 36.57	01/02/2006	A ⁽¹⁾		1,875 <u>(2)</u>		01/02/2007	01/01/2009	Common Stock	1,875
Employee Stck Option	\$ 36.57	01/02/2006	A ⁽¹⁾		1,875 <u>(2)</u>		01/02/2008	01/01/2010	Common Stock	1,875
Employee Stck Option	\$ 36.57	01/02/2006	A ⁽¹⁾		1,875 <u>(2)</u>		01/02/2009	01/01/2011	Common Stock	1,875
Employee Stck Option	\$ 36.57	01/02/2006	A ⁽¹⁾		1,875 <u>(2)</u>		01/02/2010	01/01/2012	Common Stock	1,875
Employee Stck Option	\$ 36.57	01/02/2006	A ⁽¹⁾		1,875 <u>(2)</u>		01/02/2011	01/01/2013	Common Stock	1,875
Employee Stck Option	\$ 36.57	01/02/2006	A ⁽¹⁾		1,875 <u>(2)</u>		01/02/2012	01/01/2014	Common Stock	1,875
Employee Stck Option	\$ 36.57	01/02/2006	A ⁽¹⁾		1,875 <u>(2)</u>		01/02/2013	01/01/2015	Common Stock	1,875
Employee Stck Option	\$ 36.57	01/02/2006	A ⁽¹⁾		1,875 <u>(2)</u>		01/02/2014	01/01/2016	Common Stock	1,875

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
ENGLAND GARRY L 1031 COUNTRY CLUB LANE WARSAW, IN 46580			Sr Vice President -	Warsaw Operations

Signatures

Jacqueline K. Huber POA for Garry L.
England

01/03/2006

__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).
- (1) The Reporting Person was granted a stock option pursuant to the terms of the Biomet, Inc. 1998 Qualified and Non-Qualified Stock Option Plan.
- (2) Relate to a single option grant with multiple vesting windows.

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.