#### MINOGUE MICHAEL R

Form 4 April 06, 2011

### FORM 4

#### OMB APPROVAL

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

OMB Number: 3235-0287

Check this box if no longer subject to Section 16. Form 4 or

Expires: January 31, 2005

# STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per response... 0.5

Form 4 or Form 5 obligations may continue. See Instruction

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * MINOGUE MICHAEL R	2. Issuer Name and Ticker or Trading Symbol ABIOMED INC [ABMD]	5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)		
(Last) (First) (Middle)	3. Date of Earliest Transaction			
C/O ABIOMED, INC.,, 22 CHERRY HILL DRIVE	(Month/Day/Year) 04/04/2011	_X_ Director 10% Owner Selection Other (specify below)  President, CEO, Chairman		
(Street)	4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check		
DANVERS, MA 01923	Filed(Month/Day/Year)	Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		

(City)	(State)	(Zip) Tak	ole I - Non-	Derivative Sec	curities	s Acquir	ed, Disposed of,	or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactic Code (Instr. 8)		of (D)	red (A)	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, \$.01 par value	04/04/2011		M			\$ 9.05	360,077	D	
Common Stock, \$.01 par value	04/04/2011		S(8)	172,986 I		\$ 15.006 9)	187,091	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 (9-02)

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# required to respond unless the form displays a currently valid OMB control number.

# 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)	Secu Acqu or D: (D)	rities nired (A) isposed of r. 3, 4,	6. Date Exercisals Expiration Date (Month/Day/Year		7. Title and A Underlying S (Instr. 3 and	Securities
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount Number Shares
Stock Option (right to buy) (1)	\$ 9.05	04/04/2011		M		94,892	04/05/2005(4)	04/05/2014	Common Stock	94,89
Stock Option (right to buy) (3)	\$ 9.05	04/04/2011		M		44,196	04/05/2005(4)	04/05/2014	Common Stock	44,19
Stock Option (right to buy) (2)	\$ 9.05						04/05/2005(4)	04/05/2014	Common Stock	192,20
Stock Option (right to buy) (2)	\$ 9.36						06/08/2006(4)	06/08/2015	Common Stock	100,00
Stock Option (right to buy) (2)	\$ 13.57						06/01/2007(4)	06/01/2016	Common Stock	260,00
Stock Option (right to buy) (2)	\$ 11.27						05/30/2008(4)	05/30/2017	Common Stock	85,00
Stock Option (right to buy) (2)	\$ 13.8						05/23/2009(4)	05/23/2018	Common Stock	43,33
Stock Option (right to	\$ 18.63						06/15/2009(5)	08/13/2018	Common Stock	93,75

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buy)	<u>(6)</u>			
Stock Optic (right buy)	on \$ 5.86	05/28/2010 <u>(4)</u> 05/28/2019	Common Stock	148,00
Stock Option (right buy)	on \$ 5.86	03/31/2010(7) 05/28/2019	Common Stock	130,50
Stock Option (right buy)	on \$ 10.03	06/03/2011 <u>(4)</u> 06/03/2020 C	Common Stock	105,00

### **Reporting Owners**

Reporting Owner Name / Address	Relationships						
I a garage	Director	10% Owner	Officer	Other			
MINOGUE MICHAEL R C/O ABIOMED, INC., 22 CHERRY HILL DRIVE DANVERS, MA 01923	X		President, CEO, Chairman				

### **Signatures**

/s/ Stephen McEvoy (by power of attorney)

\*\*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) Grant to reporting person of option to buy shares of Common Stock under the ABIOMED, Inc. 1998 Equity Incentive Plan.
- (2) Grant to reporting person of option to buy shares of Common Stock under the ABIOMED, Inc. 2000 Stock Incentive Plan.
- (3) Grant to reporting person of inducement option to buy shares of Common Stock under NASDAQ Marketplace Rule 4350. These options were granted outside of the Company's established stock option plans.
- (4) These options become exercisable in annual 25% increments, commencing on the date shown in Table II, Column 6.
- (5) Grant to reporting person of option to buy the number of shares of Common Stock set forth in Table II, Column 7, under the ABIOMED, Inc. 2008 Stock Incentive Plan.
- (6) These options become exercisable based on the achievement of certain performance milestones.
- (7) These options become exerciseable upon the achievement of a certain performance milestone, based on the results of Abiomed's fiscal year ended March 31, 2010.
- (8) The sale of common stock reported in this Form 4 was effected pursuant to a 10b5-1 trading plan adopted by the Reporting Person on 11/25/2009.
- (9) This price represents the weighted average sale price of multiple transactions on the reported date at prices that ranged between \$15.00 and \$15.13. Detailed information regarding the number of shares sold at each separate price will be provided upon request by the

Reporting Owners 3

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Commission staff, the Issuer, or a security holder of the Issuer.

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.