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if no los subject Section Form 4 Form 5 obligati may co <i>See</i> Inst 1(b).	this box nger to 16. or sons ntinue. truction	AENT OF ssuant to Se (a) of the Pu	Wa CHAN ection 1 ublic U	shingtor NGES IN SECU (6(a) of t ftility Ho	n, D.C. 20 I BENEF RITIES he Securi Iding Cor)549 TICLA ties E npan	L OWN Exchange	OMMISSION ERSHIP OF Act of 1934, 1935 or Section	OMB Number: Expires: Estimated a burden hour response	•	
(Print or Type	e Responses)										
Weber David M Symbol					nd Ticker on C [ABMD			5. Relationship of Reporting Person(s) to Issuer			
				Fransaction	1		(Check all applicable)				
C/O ABIO HILL DRI	Day/Year) 2016				Director 10% Owner X Officer (give title Other (specify below) Chief Operating Officer						
				-				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Tab	le I - Non-	Derivative	Secu		ired, Disposed of,	or Beneficiall	v Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	nsaction Date 2A. Deemed				ties Ac	equired (A) (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock, \$.01 par value	05/03/2016			Code V A <u>(5)</u>	Amount 13,500 (5)	(D) A	Price \$ 0	(Instr. 3 and 4) 121,676	D		
Common Stock, \$.01 par value	05/03/2016			F <u>(6)</u>	2,120 (6)	D	\$ 99.26	119,556	D		
Common Stock, \$.01 par value	05/05/2016			M <u>(7)</u>	40,000 (7)	A	\$ 13.88	159,556	D		

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Common Stock, \$.01 par value	05/05/2016	M <u>(7)</u>	12,000 (7)	A	\$ 13.8	171,556	D
Common Stock, \$.01 par value	05/05/2016	S <u>(7)</u>	25,176 (7)	D	\$ 94.8344 (8)	146,380	D
Common Stock, \$.01 par value	05/05/2016	S <u>(7)</u>	26,824 (7)	D	\$ 95.6778 <u>(9)</u>	119,556	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.

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 of onDerivative Securities Acquired (<i>A</i> or Disposed (D) (Instr. 3, 4, and 5)	Expiration Da (Month/Day/Y	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount c Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisal	le Expiration Date	Title	Amoun or Number of Share	
Stock Option (right to buy) <u>(1)</u>	\$ 13.88	05/05/2016		M <u>(7)</u>	40,0 (7)	00 04/23/2008	²⁾ 04/23/2017	Common Stock	40,00	
Stock Option (right to buy) (1)	\$ 13.8	05/05/2016		M <u>(7)</u>	12,0 (7)	00 05/23/2009	²⁾ 05/23/2018	Common Stock	12,00	
Stock Option (right to buy) (3)	\$ 5.86					05/28/2010	²⁾ 05/28/2019	Common Stock	0	
Stock Options (right to	\$ 5.86					03/31/2010	²⁾ 05/28/2019	Common Stock	0	

Stock	Common Stock 0
- $ -$	Stock
1 + (5/7)/(0)/(3/2) + (5/7)/(0)/(7)	Common 0 Stock 0
(5/14/2014/2) (5/14/2017)	Common 0 Stock 0
	Common Stock 0
	Common 0 Stock 0

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Weber David M C/O ABIOMED, INC. 22 CHERRY HILL DRIVE DANVERS, MA 01923			Chief Operating Officer					
Signatures								
/s/ Stephen C. McEvoy (by pov attorney)	ver of		05/05/2016					

<u>**</u>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 the number of shares of Common Stock set forth in Table II, Column 7, under the ABIOMED, Inc. 2000 Stock Incentive Plan.
- (2) This option becomes exercisable in annual 25% increments, commencing on the date shown in Table II, Column 6.
- (3) 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.
- (4) These options become exercisable in annual 33-1/3% increments, commencing on the date shown in Table II, Column 6.

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Represents shares of common stock underlying performance-based awards of restricted stock units granted to this reporting person on May 13, 2015. One third of these restricted stock units vested on May 3, 2016 (into an equal number of shares of common stock) upon the

- (5) May 13, 2015. One third of these restricted stock units vested on May 5, 2016 (hito an equal number of shares of common stock) upon the issuer's achievement of a certain performance milestone with the remaining vesting on the first and second anniversary of the date of the grant.
- (6) Transaction represents shares of common stock withheld solely for payment of withholding tax liability associated with the vesting of awards of restricted stock units in accordance with the time periods set forth in such awards.
- (7) Sale of common stock pursuant to reporting owner's 10b5-1 plan.
- This price represents the weighted average sale price of multiple transactions on the reported date at prices that ranged between \$93.4500(8) and \$95.4400. Detailed information regarding the number of shares sold at each separate price will be provided upon request by the Commission staff, the Issuer, or a security holder of the Issuer.
- This price represents the weighted average sale price of multiple transactions on the reported date at prices that ranged between \$95.4450
 (9) and \$96.2100. Detailed information regarding the number of shares sold at each separate price will be provided upon request by the 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.