#### MINOGUE MICHAEL R

Form 4 April 03, 2018

## FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**OMB APPROVAL** 

OMB 3235-0287 Number:

January 31, Expires: 2005

Estimated average burden hours per response... 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5

**SECURITIES** Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,

obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* MINOGUE MICHAEL R

(First)

(Street)

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to

Issuer

(Last)

(Middle)

ABIOMED INC [ABMD]

(Check all applicable)

President, CEO, Chairman

C/O ABIOMED, INC..., 22

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

03/31/2018

Filed(Month/Day/Year)

\_X\_ Director X\_ Officer (give title below)

10% Owner Other (specify

CHERRY HILL DRIVE

4. If Amendment, Date Original

Applicable Line)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

6. Individual or Joint/Group Filing(Check

Person

DANVERS, MA 01923

(City)	(State)	(Zip) Tal	ole I - Non-	De	rivative Se	curiti	es Acquire	d, Disposed of, o	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. Transactio Code (Instr. 8)	on	(Instr. 3, 4 and 5)		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	03/31/2018		Code A <u>(5)</u>	V	Amount 85 (5)	or (D)	Price \$ 290.99	(Instr. 3 and 4) 169,018	D	
value Common Stock \$.01 par value	11/29/2017		G(6)(7)		10,399 ( <u>6)</u> ( <u>7)</u>			158,619	D	
Common Stock \$.01 par value	11/29/2017		G(6)(7)	V	10,399 ( <u>6)</u> ( <u>7)</u>	A	\$ 0	134,779	I	By Trust - A

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Common Stock \$.01 par value	11/30/2017	G(7)(8)	V	15,000 (7) (8)	D	\$ 0	119,779	Ι	By Trust - A
Common Stock \$.01 par value	11/30/2017	G(7)(8)	V	15,000 (7) (8)	A	\$ 0	38,000	I	By Trust - B
Common Stock \$.01 par value							9,000	I	By Trust
Common Stock \$.01 par value							655	I	By Trust - D
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.  Persons who respond to the collection of SEC 1474.									

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.

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 (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. Transaction Code (Instr. 8)	5. DriNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			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) (2)	\$ 10.03					06/03/2011(1)	06/03/2020	Common Stock	0
Stock Option (Right to Buy) (2)	\$ 22.44					05/22/2013(1)	05/22/2022	Common Stock	0

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Stock Option (Right to Buy) (2)	\$ 23.15	05/14/2014 <u>(1)</u>	05/14/2024	Common stock	0
Stock Option (right to buy) (2)	\$ 21.55	05/14/2015(3)	05/14/2024	Common Stock	0
Stock Option (right to buy) (2)	\$ 66.25	05/13/2016(3)	05/13/2025	Common Stock	0
Stock Option (right to buy) (4)	\$ 99.62	05/24/2017(3)	05/24/2026	Common Stock	0
Stock Option (right to buy) (4)	\$ 134.51	05/15/2018(3)	05/15/2027	Common Stock	0

# **Reporting Owners**

Reporting Owner Name / Address	Relationships						
1	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 C. McEvoy (by power of attorney) 04/03/2018

\*\*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) These options become exercisable in annual 25% increments, commencing on the date shown in Table II, Column 6.
- (2) 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.
- $\textbf{(3)} \quad \text{These options become exercisable in annual } 33\text{-}1/3\% \text{ increments, commencing on the date shown in Table II, Column } 6.$
- (4) 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. 2015 Omnibus Incentive Plan.

(5)

Reporting Owners 3

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These shares of common stock were acquired by the reporting person through participation in the ABIOMED, Inc. Employee Stock Purchase Plan, qualified under Section 423 of the Internal Revenue Code, and the transaction was exempt under Rule 16b-3(c).

- (6) This transaction represents the transfer of common stock by bona fide gift from the reporting person to a trust held for the benefit of the reporting person's spouse. The reporting person's spouse in a trustee of the trust.
- (7) The reporting person disclaims beneficial ownership of these securities, and the filing of this report is not an admission that the reporting person is the beneficial owner of these securities for purposes of Section 16 or for any other purpose.
- (8) This transaction represents the transfer of common stock by bona fide gift from a trust held for the benefit of reporting person's spouse to a trust held for the benefit of reporting person's children.

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.