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ABIOMED Form 4	O INC									
November	22, 2010									
FOR	\mathbf{M} 4 UNITED	STATES	SFCU	DITIES	AND FY	ксн	ANCEC	OMMISSION		APPROVAL
		SIAIL			on, D.C. 2			01/11/11/05101	OMB Number:	3235-0287
Check this box if no longer subject to Section 16. Form 4 or					N BENE		AL OWN	ERSHIP OF	Expires: Estimated burden ho response.	ours per
Form 5 obligations may continue. See Instruction 1(b). 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	e Responses)									
	Address of Reporting R HENRI A	g Person <u>*</u>	Symbol	l	nd Ticker o			5. Relationship of Issuer	Reporting Pe	erson(s) to
(Last)	(First)	(Middle)			Transactio	-		(Chec	k all applicat	ole)
, <i>,</i> ,	MED, INC., 22 (. ,		/Day/Year)				X Director Officer (give below)		% Owner ther (specify
	(Street)		4. If An	nendment,	Date Origin	nal		6. Individual or Jo	oint/Group Fil	ling(Check
DANVER	S, MA 01923		Filed(M	lonth/Day/Y	ear)			Applicable Line) _X_ Form filed by O Form filed by M Person		
(City)	(State)	(Zip)	Ta	ble I - Nor	n-Derivativ	e Seci	urities Acqu	iired, Disposed of	, or Benefici	ally Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemo Execution any (Month/Da	ed Date, if	3.		ties Ac ed of 4 and (A)	cquired (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)
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)	. ,	
Common Stock, \$0.01 par value								60,100	D	
Common Stock, \$.01 par value	11/19/2010			S	10,000	D	\$ 11.8467 (6)	1,982,807	I	By Genzyme Corporation
Common Stock, \$.01 par value	11/22/2010			S	700	D	\$ 11.7386 (7)	1,982,107	I	by Genzyme Corporation (3)

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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. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration Date (Month/Day/Year e	5. Date Exercisable and Expiration Date Month/Day/Year)		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) (1)	\$ 19.69					08/09/2001 <u>(2)</u>	08/09/2010	Common Stock	5,000	
Stock Option (right to buy) (1)	\$ 18.4					08/08/2002 <u>(2)</u>	08/08/2012	Common Stock	5,000	
Stock Option (right to buy) (1)	\$ 4.71					08/06/2003 <u>(2)</u>	08/06/2013	Common Stock	5,000	
Stock Option (right to buy) (1)	\$ 5.15					08/13/2004 <u>(2)</u>	08/13/2014	Common Stock	5,000	
Stock Option (right to buy) (4)	\$ 10.41					08/11/2005(2)	08/11/2014	Common Stock	8,000	
Stock Option (right to buy) (4)	\$ 10.06					08/09/2006 <u>(2)</u>	08/10/2015	Common Stock	8,000	
	\$ 13.21					08/08/2007(2)	08/09/2016		8,000	

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Stock Option (right to buy) (4)				Common Stock	
Stock option (right to buy) (4)	\$ 12.69	08/13/2008 <u>(2)</u>	08/08/2017	Common Stock	8,000
Stock Option (right to buy) (5)	\$ 18.63	08/12/2009 <u>(2)</u>	08/13/2018	Common Stock	8,000
Stock Option (right to buy) (5)	\$ 7.67	08/11/2010 <u>(2)</u>	08/12/2019	Common Stock	12,000
Stock Options (right to buy) (5)	\$ 9.99	08/10/2011	08/11/2020	Common Stock	12,000

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
TERMEER HENRI A C/O ABIOMED, INC. 22 CHERRY HILL DRIVE DANVERS, MA 01923	X						
Signatures							
/s/ Ian W. McLeod (by power o	f	11/2	2/2010				

attorney) _______ ___ ___ ___ ___ 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. 1989 Non-Qualified Stock Option Plan for Non-Employee Directors.
- (2) This option becomes exercisable in full on the date set forth in Table II, Column 6.

The reporting person disclaims beneficial ownership of these securities, and this report shall not be deemed an admission that the

- (3) reporting person is the beneficial owner of such securities for the purposes of Section 16 or for any other purposes. The reporting person is the Chief Executive Officer of Genzyme Corporation.
- (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. 2000 Stock Incentive Plan.

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 (5) Grant to reporting person of option to buy shares of Common Stock set forth in Table II, Column 7, under the ABIOMED, Inc. 2008 Stock Incentive Plan.

This price represents the weighted average sale price of multiple transactions on the reported date at prices that ranged between \$11.72(6) and \$11.97. 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 \$11.70
 (7) and \$11.76. 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.