ABIOMED INC Form 4 October 06, 2005

FORM 4

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

OMB 3235-0287

OMB APPROVAL

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if no longer subject to Section 16. Form 4 or Form 5 obligations

may continue.

See Instruction

Check this box

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * Macdonald Christopher D

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last)

(First)

(Middle)

(Zip)

ABIOMED INC [ABMD] 3. Date of Earliest Transaction

10% Owner

C/O ABIOMED, INC., 22 CHERRY

(Street)

(State)

(City)

09/30/2005

(Month/Day/Year)

X_ Officer (give title below) **SVP Global Sales**

Other (specify

HILL DRIVE

4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check

Director

Applicable Line)

Filed(Month/Day/Year)

X 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

DANVERS, MA 01923

1.Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year) Execution Date, if (Instr. 3) (Month/Day/Year)

3. 4. Securities Acquired 5. Amount of Transaction(A) or Disposed of Code (D) (Instr. 8) (Instr. 3, 4 and 5)

(A)

Securities Beneficially Owned Following Reported Transaction(s)

(Instr. 3 and 4)

6. Ownership 7. Nature of Form: Direct Indirect (D) or Beneficial Indirect (I) Ownership (Instr. 4) (Instr. 4)

Common

Stock, \$.01 09/30/2005 par value

V 210 (3) A

Code V Amount (D)

Price

D

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)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Sec Acc		orNumber	(Month/Day/Year) rivative rurities quired			7. Title and Amount of Underlying Securities (Instr. 3 and 4)		
					Disposed of (D) (Instr. 3, 4, and 5)					
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (right to buy) (1)	\$ 11.66					05/13/2005(2)	05/13/2014	Common Stock	50,000	
Stock Option (right to buy) (1)	\$ 12.6					06/15/2005(2)	06/15/2014	Common Stock	10,000	
Stock Option (right to buy) (1)	\$ 10.8					03/01/2006(2)	03/01/2015	Common Stock	55,000	
Stock Option (right to buy) (1)	\$ 9.36					06/08/2006(2)	06/08/2015	Common Stock	25,000	

Reporting Owners

**Signature of Reporting Person

(attorney-in-fact)

Reporting Owner Name / Address	Relationships						
reporting o mior runne, runness	Director	10% Owner	Officer	Other			
Macdonald Christopher D C/O ABIOMED, INC. 22 CHERRY HILL DRIVE DANVERS, MA 01923			SVP Global Sales				
Signatures							
/s/ Charles B. Haaser		10/06/20	005				

Reporting Owners 2

10/06/2005

Date

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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 ABIOMED, Inc. 2000 Stock Incentive Plan.
- (2) These options become exercisable in annual 25% increments commencing on the date shown in Table II, Column 6.
- (3) 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.

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.