

HAASER CHARLES B
Form 4
June 10, 2005

FORM 4

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

OMB APPROVAL

OMB Number: 3235-0287
Expires: January 31, 2005
Estimated average burden hours per response... 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 Responses)

1. Name and Address of Reporting Person *
HAASER CHARLES B

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 (Month/Day/Year)
06/08/2005

___ Director ___ 10% Owner
X Officer (give title below) _X_ Other (specify below)
Principal Financial Officer / Acting Chief Financial Officer

C/O ABIOMED, INC., 22 CHERRY HILL DRIVE

(Street)

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)
X Form filed by One Reporting Person
___ Form filed by More than One Reporting Person

DANVERS, MA 01923

(City) (State) (Zip)

Table I - Non-Derivative Securities Acquired, Disposed of, 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. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	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 Ownership (Instr. 4)
				(A) or (D) Price			
Common Stock, \$.01 par value					2,379	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.

SEC 1474 (9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

Edgar Filing: HAASER CHARLES B - Form 4

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. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	Amount or Number of Shares	
				Code	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (right to buy) ⁽³⁾	\$ 4.844					11/02/2000 ⁽¹⁾	11/02/2008	Common Stock	5,000
Stock Option (right to buy) ⁽³⁾	\$ 6.688					07/01/2001 ⁽²⁾	07/01/2009	Common Stock	1,400
Stock Option (right to buy) ⁽⁴⁾	\$ 15.563					06/28/2002 ⁽⁶⁾	06/28/2010	Common Stock	10,000
Stock Option (right to buy) ⁽⁵⁾	\$ 18.4					08/08/2003 ⁽⁷⁾	08/08/2011	Common Stock	5,000
Stock Option (right to buy) ⁽⁵⁾	\$ 6.75					06/25/2004 ⁽⁸⁾	06/25/2012	Common Stock	5,000
Stock Option (right to buy) ⁽⁴⁾	\$ 5.11					06/25/2005 ⁽⁹⁾	06/25/2013	Common Stock	5,000
Stock Option (right to buy) ⁽⁵⁾	\$ 12.3					07/01/2005 ⁽¹⁰⁾	07/01/2014	Common Stock	15,000
Stock Option (right to buy) ⁽⁵⁾	\$ 10.8					03/01/2006 ⁽¹⁰⁾	03/01/2015	Common Stock	12,500
Stock Option (right to buy) ⁽⁵⁾	\$ 9.36	06/08/2005		A	20,000	06/08/2006 ⁽¹⁰⁾	06/08/2015	Common Stock	20,000

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
HAASER CHARLES B C/O ABIOMED, INC. 22 CHERRY HILL DRIVE DANVERS, MA 01923			Principal Financial Officer	Acting Chief Financial Officer

Signatures

/s/ Charles B.
Haaser

06/10/2005

**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) Original option grant becomes exercisable in annual 25% installments commencing on the date shown.
- (2) Thirty percent of the original option grant became exercisable on 7/1/01 and were subsequently exercised. Another 30 percent became exercisable on 7/1/02 and an additional 40 percent will become exercisable on 7/1/03.
- (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. 1992 Combination Stock Option Plan.
- (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. 1998 Equity Incentive Plan.
- (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. 2000 Stock Incentive Plan.
- (6) Thirty percent of this option will become exercisable on each of 6/28/02 and 6/28/03 and an additional 40 percent will become exercisable on 6/28/04.
- (7) Thirty percent of this option will become exercisable on each of 8/8/03 and 8/8/04 and an additional 40 percent will become exercisable on 8/8/05.
- (8) Thirty percent of this option will become exercisable on each of 6/25/04 and 6/25/05 and an additional 40 percent will become exercisable on 6/25/06.
- (9) Thirty percent of this option will become exercisable on each of 6/25/05 and 6/25/06 and an additional 40 percent will become exercisable on 6/25/07.
- (10) These options become exercisable in annual 25% increments, commencing on the date shown in Table II, Column 6.

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.