

BOLT WILLIAM J
Form 4
May 31, 2011

FORM 4

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

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

OMB APPROVAL

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(Print or Type Responses)

1. Name and Address of Reporting Person *
BOLT WILLIAM J

(Last) (First) (Middle)

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

(Street)

DANVERS, MA 01923

(City) (State) (Zip)

2. Issuer Name **and** Ticker or Trading
Symbol
ABIOMED INC [ABMD]

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

05/24/2011

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

5. Relationship of Reporting Person(s) to
Issuer

(Check all applicable)

____ Director ____ 10% Owner
__X__ Officer (give title ____ Other (specify
below) below)

SVP, QA and Regulatory Affairs

6. Individual or Joint/Group Filing(Check
Applicable Line)
__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

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 Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount (A) or (D)	Price	
Common Stock, \$.01 par value	05/24/2011		A		9,000 (7)	A \$ 0	98,394 (8) D

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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information contained in this form are not
required to respond unless the form
displays a currently valid OMB control
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(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	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)	8.
				Code	V (A) (D)	Date Exercisable Expiration Date	Title	Amount or Number of Shares
Stock Option (right to buy) ⁽²⁾	\$ 15.563					06/28/2004 ⁽¹⁾ 06/28/2010	Common Stock	40,000
Stock Option (right to buy) ⁽³⁾	\$ 24.12					06/22/2005 ⁽¹⁾ 06/22/2011	Common Stock	25,000
Stock Option (right to buy) ⁽³⁾	\$ 6.75					06/25/2004 ⁽¹⁾ 06/25/2012	Common Stock	50,000
Stock Option (right to buy) ⁽²⁾	\$ 5.11					06/25/2005 ⁽¹⁾ 06/25/2013	Common Stock	16,000
Stock Option (right to buy) ⁽³⁾	\$ 12.3					07/01/2005 ⁽⁴⁾ 07/01/2014	Common Stock	18,000
Stock Option (right to buy) ⁽³⁾	\$ 9.36					06/08/2006 ⁽⁴⁾ 06/08/2015	Common Stock	30,000
Stock Option (right to buy) ⁽³⁾	\$ 13.57					06/01/2007 ⁽⁴⁾ 06/01/2016	Common Stock	20,000
Stock Option (right to buy) ⁽³⁾	\$ 11.27					05/30/2008 ⁽⁴⁾ 05/30/2017	Common Stock	8,000
	\$ 13.8					05/23/2009 ⁽⁴⁾ 05/23/2018		9,666

Stock option (right to buy) ⁽³⁾					Common Stock	
Stock Option (right to buy) ⁽⁵⁾	\$ 5.86	05/28/2010 ⁽⁴⁾	05/28/2019	Common Stock	50,000	
Stock Option (right to buy) ⁽⁵⁾	\$ 5.86	03/31/2010 ⁽⁶⁾	05/28/2019	Common Stock	18,000	
Stock Option (right to buy) ⁽⁵⁾	\$ 10.03	06/03/2011 ⁽⁴⁾	06/03/2020	Common Stock	30,000	

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
BOLT WILLIAM J C/O ABIOMED, INC. 22 CHERRY HILL DRIVE DANVERS, MA 01923			SVP, QA and Regulatory Affairs	

Signatures

/s/ Ian W. McLeod (by power of attorney) 05/31/2011

____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) Options were fully exercisable on the date shown.
- (2) Grant to reporting person of this option to buy the number of Common Stock set forth in Table II, Column 7, under the ABIOMED, Inc. 1998 Equity Incentive Plan.
- (3) Grant to reporting person of this option to buy the number of Common Stock set forth in Table II, Column 7, under the ABIOMED, Inc. 2000 Stock Incentive Plan.
- (4) These options become exercisable in annual 25% increments, commencing on the date shown in Table II, Column 6.
- (5) Grant to reporting person of this option to buy the number of Common Stock set forth in Table II, Column 7, under the ABIOMED, Inc. 2008 Stock Incentive Plan.
- (6) These options became fully exerciseable on March 31, 2010.
- (7) Represents the grant of a performance share award for restricted stock units pursuant to which one third of the shares will be issued to the reporting person on each of May 26, 2012, May 23, 2013 and May 26, 2014, so long as he continues to be employed by the issuer on the vesting dates. In addition, additional performance share award of up to 14,000 restricted stock units was granted to the reporting person

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on May 26, 2011 with double trigger vesting pursuant to which 2012 revenue performance will determine whether 0%, 50% or 100% of the underlying restricted stock units are eligible for vesting, at which point half of the units eligible for vesting will vest on May 26, 2013 and the other half of the units eligible for vesting will vest on May 26, 2014.

- (8) Includes 9,000 shares represented by a performance share award for restricted stock units pursuant to which one third of the shares will be issued to the reporting person on each of May 26, 2012, May 26, 2013 and May 26, 2014, so long as he continues to be employed by the issuer on the vesting dates.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure.

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