Edgar Filing: Cardiovascular Systems Inc - Form 4

Cardiovascu Form 4	ılar Systems Inc											
July 02, 201	4											
									OMB APPROVAL			
	UNITED	Washington, D.C. 20549								3235-0287		
Check th if no lon subject t Section Form 4 o Form 5 obligatio may con	ger o 16. or Filed pur ons Section 17(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								Expires:January 31, 2005Estimated average burden hours per response0.5		
<i>See</i> Instruction 30(h) of the Investment Company Act of 1940 1(b).												
(Print or Type	Responses)											
BETTERLEY LAURENCE L Symbol				U				 Relationship of Reporting Person(s) to Issuer (Check all applicable) 				
(Last)	(First) (I	Middle)	3. Date of Earliest Transaction				(Check		/			
651 CAMP	(Month/Day/Year) 06/30/2014											
				Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
						y More than One Reporting						
(City)	(State)	(Zip)	Tab	ole I - Non-	Derivative	Secu	rities Acqu	iired, Disposed of,	or Beneficiall	y Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	action Date 2A. Deemed Day/Year) Execution Date, if any (Month/Day/Year)			onor Dispos (Instr. 3, 4	ed of		5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	OwnershipIndirectForm:BeneficialDirect (D)Ownershipor Indirect(Instr. 4)(I)(Instr. 4)	Beneficial Ownership		
~				Code V	Amount	(D)	Price \$	(Instr. 3 and 4)				
Common Stock	06/30/2014			S	13,456	D	31.2401 (1)	178,815	D			
Common Stock	06/30/2014			S	2,870	D	\$ 32.0717 (2)	7 175,945	D			

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

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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. Transactio Code (Instr. 8)	· · · ·		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price Deriva Securit (Instr. :	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (right to buy)	\$ 8.75					(3)	03/01/2019	Common Stock	14,234	

Reporting Owners

Reporting Owner Name / Address			Relationships	
	Director	10% Owner	Officer	Other
BETTERLEY LAURENCE L 651 CAMPUS DRIVE ST. PAUL, MN 55112			Chief Financial Officer	
Signatures				

Signatures

/s/ Amanda Schmall as Attorney-in-Fact for Laurence L. Betterley pursuant to Power of 07/02/2014 Attorney previously filed.

**Signature of Reporting Person

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).

The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$30.95 to \$31.83 inclusive. The reporting person undertakes to provide Cardiovascular Systems, Inc., any security holder of Cardiovascular (1)

Systems, Inc. or the staff of the Securities and Exchange Commission upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.

The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$32.00 to \$32.33 inclusive. The reporting person undertakes to provide Cardiovascular Systems, Inc., any security holder of Cardiovascular

- (2)Systems, Inc. or the staff of the Securities and Exchange Commission upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.
- (3) Fully exercisable.

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.

Date