Cardiovascular Systems Inc Form 4

August 13, 2014

### FORM 4

Check this box

if no longer

subject to

Section 16.

Form 4 or

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

# STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB APPROVAL** 

3235-0287

January 31,

2005

0.5

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Form 5 obligations may continue. See Instruction

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

1(b).

Stock

(Print or Type Responses)

1. Name and Address of Reporting Person \* 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading Koehn Paul A Issuer Symbol Cardiovascular Systems Inc [CSII] (Check all applicable) (First) (Middle) (Last) 3. Date of Earliest Transaction (Month/Day/Year) Director 10% Owner X\_ Officer (give title Other (specify 651 CAMPUS DRIVE 08/11/2014 below) **SVP Quality & Operations** (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) \_X\_ Form filed by One Reporting Person Form filed by More than One Reporting ST. PAUL, MN 55112 Person (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1.Title of 2. Transaction Date 2A. Deemed 3. 4. Securities 5. Amount of 6. Ownership 7. Nature of

Security (Month/Day/Year) Execution Date, if TransactionAcquired (A) or Securities Form: Direct Indirect (Instr. 3) Code Disposed of (D) Beneficially (D) or Beneficial (Instr. 3, 4 and 5) Indirect (I) Ownership (Month/Day/Year) (Instr. 8) Owned

> Reported (A) Transaction(s) (Instr. 3 and 4) Code V Amount Price

(D)

Common 08/11/2014 A 321 (1) A \$0 54,305 (2) D

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

Following

(Instr. 4)

(Instr. 4)

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

#### Edgar Filing: Cardiovascular Systems Inc - Form 4

8. Price Deriva Securit (Instr.

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. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Title and A Underlying S (Instr. 3 and	Securities
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (right to buy)	\$ 8.83					(3)	04/17/2017	Common Stock	35,585
Stock Option (right to buy)	\$ 8.83					(3)	04/17/2017	Common Stock	1,294
Stock Option (right to buy)	\$ 7.9					(3)	06/11/2017	Common Stock	8,087
Stock Option (right to buy)	\$ 7.9					(3)	10/08/2017	Common Stock	12,940
Stock Option (right to buy)	\$ 12.15					(3)	12/11/2017	Common Stock	32,350
Stock Option (right to buy)	\$ 8.75					(3)	03/01/2019	Common Stock	8,087

# **Reporting Owners**

Reporting Owner Name / Address			Relationships				
1 8	Director	10% Owner	Officer	Other			
Koehn Paul A							
651 CAMPUS DRIVE			SVP Quality & Operations				
ST PAUL MN 55112			·				

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### **Signatures**

/s/ Amanda Schmall as Attorney-in-Fact for Paul Koehn pursuant to Power of Attorney previously filed.

08/13/2014

\*\*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) The award vests as to 107 shares on each of August 13, 2015, August 13, 2016 and August 13, 2017.
- (2) Includes 538 shares acquired on December 31, 2013 through the Issuer's Employee Stock Purchase Plan.
- (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.

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