Gordon Mikael Form 4 May 07, 2012

FORM 4

OMB APPROVAL

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

OMB Number: 3235-0287

Check this box if no longer subject to Section 16.

Expires: January 31, 2005

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per response... 0.5

Form 4 or 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).

(Print or Type Responses)

1. Name and Address of Reporting Person * Gordon Mikael			2. Issuer Name and Ticker or Trading Symbol HAEMONETICS CORP [HAE]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)		
(Last)	(First)	(Middle)	3. Date of Earliest Transaction	(see approximately		
400 WOOD RO	OOD ROAD		(Month/Day/Year) 05/03/2012	Director 10% OwnerX Officer (give title Other (specify below) President, Global Markets		
(Street)			4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check		
BRAINTREE,	MA 02184		Filed(Month/Day/Year)	Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		

(City)	(State)	(Zip) Tab	le I - Non-l	Derivative	e Secu	rities Acqui	red, Disposed of,	or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactio Code (Instr. 8)			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	(D)	Price	(IIIsu. 3 and 4)		
Common Stock	05/03/2012		M	8,000	A	\$ 55.14	12,442 (1)	D	
Common Stock	05/03/2012		S	8,000	D	\$ 71.4984	4,442 <u>(1)</u>	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)

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$\label{thm:convertible} \begin{tabular}{ll} Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned \\ (e.g., puts, calls, warrants, options, convertible securities) \end{tabular}$

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. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisab Expiration Date (Month/Day/Year		7. Title and A Underlying S (Instr. 3 and	Secu
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	An or No of
Non-Qualified Stock Option (right to buy)	\$ 55.14	05/03/2012		M	8,000	01/22/2009(2)	01/22/2015	Common Stock	8
Non-Qualified Stock Option (right to buy)	\$ 52.94					10/27/2010(2)	10/27/2016	Common Stock	ģ
Non-Qualified Stock Option (right to buy)	\$ 54.55					10/22/2009(2)	10/22/2015	Common Stock	(7)
Non-Qualified Stock Option (right to buy)	\$ 54.99					10/27/2011(2)	10/27/2017	Common Stock	1
Non-Qualified Stock Option (right to buy)	\$ 61.34					10/25/2012(2)	10/25/2018	Common Stock	1

Reporting Owners

Reporting Owner Name / Address		Kelationships

Director 10% Owner Officer Other

Gordon Mikael
400 WOOD ROAD
President, Global Markets
BRAINTREE, MA 02184

Signatures

By: Susan M. Hanlon For: Mikael

Gordon 05/04/2012

**Signature of Reporting Person 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) Total includes Restricted Stock Awards and/or Restricted Stock Units that are subject to restrictions until vesting requirements are met. Grant was made under 2005 Long Term Incentive Compensation Plan.
- (2) Grant to reporting person of right to buy shares of common stock exercisable in annual increments of 25 percent beginning on the first anniversary of the date of grant.

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.