FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, [D.C. 20549
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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

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Llorens Josep						2. Issuer Name and Ticker or Trading Symbol HAEMONETICS CORP [HAE]									ck all app Direc	,		rson(s) to Is 10% Ov Other (s	vner
(Last) 125 SUN	t) (First) (Middle) SUMMER STREET					3. Date of Earliest Transaction (Month/Day/Year) 05/28/2024									belov	<i>ı</i>) ``	Man	below) ufacturing	'
(Street) BOSTON MA 02110 (City) (State) (Zip)			4. If Amendment, Date of Original Filed (Month/Day/Year) Rule 10b5-1(c) Transaction Indication										Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
		Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.																	
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired	, Dis	posed of	, or E	Benet	iciall	y Own	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					Exectification if any	eemed ution Date, / th/Day/Year)				s Acquired (A) Of (D) (Instr. 3,			Securi Benefi	5. Amount of Securities Beneficially Owned Following		m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v			Amount	(A) (D)	or P	rice	Transa	action(s) 3 and 4)		<u> </u>	(111511. 4)			
Common Stock 05/					2024				Α		14,140(1)	A		\$0	0 35,450 ⁽²⁾			D	
Common Stock 05				05/28/2	2024				F		4,510(3)	Г	\$	95.73	30	30,940(2)		D	
	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)	Execut if any	A. Deemed xecution Date, 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)		Exercition Da		7. Titl Amou Secur Under Deriva Secur 3 and	int of rities rlying ative rity (Ins	Str.	Price of erivative ecurity 1str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transactio (Instr. 4)	y Oi Oi Oi (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code V (A) (D)			Date Expiration Date		Expiration Date	Title	of Share							

Explanation of Responses:

- 1. Represents shares earned from a performance share unit ("PSU") award granted to the reporting person on May 18, 2021, based on the issuer's total shareholder return relative to that of the companies comprising the S&P MidCap 400 Index for the performance period from May 18, 2021 to May 17, 2024, as certified by the Compensation Committee of the Board of Directors on May 26, 2024.
- 2. This number includes unvested restricted stock units ("RSUs") previously reported.
- 3. Represents shares withheld for tax obligations in connection with the vesting of certain PSUs reported in Table I.

/s/ Thomas V. Powers, attorney-in-fact for Mr.

05/29/2024

Llorens

** Signature of Reporting Person Date

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

- * 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).

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

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 Number.