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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

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

	Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

1. Name and Address of Reporting Person* <u>COYLE MICHAEL J</u>					2. Issuer Name and Ticker or Trading Symbol HAEMONETICS CORP [HAE]										p of Reporti plicable)	ing Pe	erson(s) to I	
(Last) (First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 08/04/2023									Office	er (give title v)		Other (below)	specify	
125 SUMMER STREET					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) BOSTO													X	X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City) (State) (Zip)						Rule 10b5-1(c) Transaction Indication												
					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	- No	n-Derivat	tive S	ecur	ities Ac	quired,	Dis	posed of	f, or E	Benefi	ciall	y Owr	ned			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day)					Execution Date,					es Acquired (A) Of (D) (Instr. 3, 4		4 Securi Benefi Owned Follow		ties cially d ving	Forr (D) c Indii	n: Direct or rect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount	nt (A) or (D)		се	Transa	Reported Transaction(s) Instr. 3 and 4)			
Common Stock 08/04/2					2023		A		2,226(1)		4	(2)	10,494		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 Exercises Price of Derivative Security		ion Date E (Month/Day/Year) if (M		eemed tion Date, n/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 Securities Underlying Derivative Security (Instr. 3 and		Der Sec (Ins	vative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(: (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
												or						

Explanation of Responses:

1. The securities awarded are in the form of restricted stock units ("RSUs") issued pursuant to the Haemonetics Corporation Amended and Restated 2019 Long-Term Incentive Compensation Plan. The RSUs vest 100% on the first anniversary of the date of grant.

(D)

(A)

Date Exercisable Expiration Date

2. Each RSU represents a contingent right to receive one (1) share of the Issuer's common stock when vested.

/s/ Thomas V. Powers,

attorney-in-fact for Mr. Coyle

of Shares

Title

** Signature of Reporting Person Date

08/08/2023

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).

Code

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.