FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	$D \subset$	20540	
vasiiiiiqtoii,	D.C.	20549	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									
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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).

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* Miller Laurie A. (Last) (First) (Middle)						2. Issuer Name and Ticker or Trading Symbol HAEMONETICS CORP [HAE] 3. Date of Earliest Transaction (Month/Day/Year) 05/15/2023								(Ch	Director Officer below	or (give title		10% Ow Other (s below)	/ner
(Street)	MMER STR		02110		4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(Si	ate)	(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.										ed to			
		Tabl	e I - No	n-Deriv	ative	Sec	uritie	s Ac	quired,	Dis	posed o	of, or E	3en	eficial	lly Owne	d			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					Execution Date,		Transaction Disposed Code (Instr. 5)		rities Acquired (A) or d Of (D) (Instr. 3, 4 and		5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)				
									Code	v	Amount	(A)	or	Price	Transac (Instr. 3	ction(s)			(1130.4)
Common Stock 05/15/				/2023	2023		A		2,102	(1)	A	(2)	15,	,091 ⁽³⁾		D			
Common Stock 05/16/2			/2023				F		235(4	4)]	D	\$89.2	89.21 14,856		856 ⁽³⁾				
	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. Deen Executio if any (Month/E	n Date,	Transaction of E			Expiration	Date Exercisable and cpiration Date Securities Underlying Derivative Securities. (Instr. 3 and 4)				8. Price of Derivative Security (Instr. 5)		у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
				Code V (A) (D) Exercisable Date Title Shares															
Non- qualified Stock Option (Right to	\$89.16	05/15/2023			A		4,751		(5)	0	5/15/2030	Commo Stock	n 4	4,751	\$0	4,751		D	

Explanation of Responses:

- 1. The securities awarded are in the form of restricted stock units ("RSUs") issued pursuant to the Haemonetics Corporation 2019 Long-Term Incentive Compensation Plan. The RSUs vest in three equal annual installments beginning on the first anniversary of the date of grant.
- 2. Each RSU represents a contingent right to receive one (1) share of the Issuer's common stock when vested.
- 3. This number includes unvested RSUs previously reported.
- 4. Represents shares withheld for tax obligations in connection with the vesting of certain RSUs previously reported in Table I.
- $5. \ Option \ vests \ in \ annual \ increments \ of \ 25\% \ beginning \ on \ the \ first \ anniversary \ of \ the \ date \ of \ grant.$

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

05/17/2023

** Signature of Reporting Person

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.