FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Check this box if no longer subject to	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
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

OMB APPROVAL OMB Number: Estimated average burden

0.5

hours per response:

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* Bolorforosh Said						2. Issuer Name and Ticker or Trading Symbol HAEMONETICS CORP [HAE]									all app Direc	olicable) ctor		Owner	
(Last) 400 WO	t) (First) (Middle) WOOD ROAD					3. Date of Earliest Transaction (Month/Day/Year) 06/12/2019								X	belov			′ I	
(Street) BRAINT (City)	BRAINTREE MA 02184				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indi Line) X	Forn	or Joint/Group Filing (Check Applicable m filed by One Reporting Person m filed by More than One Reporting son			
		Tabl	e I - No	n-Deriv	ative	Sec	curitie	s Ac	quired	Dis	posed o	f, or E	Benefi	cially	Owne	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					Execution Date,			3. Transaction Code (Instr. 8)					and 5) Securi Benefi		icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) (D)	or Pri	ce	Trans	action(s) 3 and 4)		(Instr. 4)	
Common Stock 06/12/2					/2019	.019		S		69(1)	Γ	\$1	09.37	2	,141 ⁽²⁾	D			
		Та									osed of, onvertib				wned				
1. Title of Derivative Security (Instr. 3)	rivative Conversion Date Execution curity or Exercise (Month/Day/Year) if any		n Date, Transactio					6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		Deri Sec (Ins	rice of vative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa	ıble	Expiration Date	Title	of Shares						

Explanation of Responses:

1. Represents the number of shares required to be sold by the reporting person to cover tax withholding obligations in connection with the vesting of certain restricted stock units previously reported in Table I following the date of grant. This sale is mandated by the Issuer's election under its 2005 Long Term Incentive Compensation Plan (as amended) to require the satisfaction of tax withholding obligations to be funded by a "sell to cover" transaction and does not represent a discretionary trade by the reporting person.

2. This number includes unvested restricted stock units previously reported.

/s/ Thomas V. Powers, attorney-in-fact for Dr. **Bolorforosh**

06/13/2019

** 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.