FORM 4

Check this box if no longer subject

to Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. 20549 |
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| STATEMENT OF C | HANGES IN | BENEFICIAL | OWNERSHIP |
|----------------|-----------|------------|-----------|
| | | | |

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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* COYLE MICHAEL J | | | | | | 2. Issuer Name and Ticker or Trading Symbol HAEMONETICS CORP [HAE] | | | | | | | | | k all app | ionship of Reportino all applicable) Director | | rson(s) to Is | |
|--|--|-------|-----------------------------------|--------------------------|---|--|---|---------|--|-------------------------------------|---|------------|---|--|-----------------|--|--|----------------|---------|
| (Last) 125 SUM | (Fir | , | Middle) | | | te of E | | t Trans | action (N | /Jonth/ | onth/Day/Year) | | | | Office below | cer (give title ow) | | Other (sbelow) | specify |
| (Street) BOSTON (City) | N M | A 0 | 2110 Zip) | | 4. If A | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Ind Line) X | | | | | |
| | | Table | I - Nor | n-Deriva | ative S | Secu | rities | Acq | uired, | Dis | posed of | , or E | Bene | ficiall | y Own | ed | | | |
| Dat | | | 2. Transac Date (Month/Da | Exec (ay/Year) if any | | A. Deemed xecution Date, any Month/Day/Year) | | | | es Acquired (A Of (D) (Instr. 3, | | | 5. Amo Securit Benefic Owned Report | ies cially Following | Forn (D) c | n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | Code | v | Amount | (A) (D) | (A) or (D) | | Transa | action(s) 3 and 4) | | | , , |
| Common Stock | | | 07/21/ | 2020 | | | A | | 1,983(1) | A | A (2) | | 2,461(3) | | | 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) | erivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any | | Transaction Code (Instr. 8) | | of Deriv Secu Acqu (A) o Dispo | r osed) r. 3, 4 | 6. Date Exerci Expiration Dat (Month/Day/Ye | | te Am ear) Sec Und Der Sec | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | Price of rivative curity str. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | у | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | v | (A) | (D) | Date Exercis | able | Expiration Date | Title | Amou or Numb of Share | per | | | | | |

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 100% 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.

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

07/22/2020

** 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.