FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, 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

Name and Address of Reporting Person*     Bryant Diane M				2. Issuer Name and Ticker or Trading Symbol HAEMONETICS CORP [ HAE ]								(Ct	neck all app	onship of Reporti III applicable) Director		10% Ov	wner		
(Last)	(Fir	(First) (Middle)			3. Date of Earliest Transaction (Month/Day/Year) 07/25/2024								belov	er (give title v)		Other (s 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)															Form filed by One Reporting Person Form filed by More than One Reporting				
BOSTO	N MA	A 0	2110												Perso		re tna	n One Repo	orting
(City)	(Sta	ate) (Z	Zip)		Rule 10b5-1(c) Transaction Indication														
						Check this box to indicate that a transaction was made pursuant t satisfy the affirmative defense conditions of Rule 10b5-1(c). See I													
		Table	I - Noi	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or I	Bene	eficia	illy Own	ed			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Date)					Execu ny/Year) if any		Deemed cution Date, y nth/Day/Year)				es Acquired (A Of (D) (Instr. 3,			Securii Benefi Owned	Amount of ecurities eneficially wned Following		n: Direct r Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
							Code	v	Amount	(A)	(A) or (D) Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common Stock 07/25/2					2024			A		2,207(1)	1	A	(2)	4	4,433		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)	/e   Conversion   Date   Execution Date, or Exercise   (Month/Day/Year)   if any			on Date,	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 (Ins 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		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	or Nun of						

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

/s/ Thomas V. Powers, 07/26/2024 attorney-in-fact for Ms. Bryant

\*\* Signature of Reporting Person

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

- $^{\star}$  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.