FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPROVAL								
	OMB Number:	3235-0287							
l	Estimated average burde	en							
l	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* Ryding Neil 122-62-507						2. Issuer Name and Ticker or Trading Symbol HAEMONETICS CORP [HAE]									ck all applica Director			on(s) to Issuer 10% Owner Other (specify			
(Last) 400 WOO	(First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 10/25/2016									below)	Officer (give title below) EVP, Global Man		below)	респу		
(Street) BRAINTREE MA 02184					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)	X Form filed by One Reporting Person Form filed by More than One Reporting						
(City)	(City) (State) (Zip)															Person					
		Tab	le I - Nor	n-Deriv	ative	Se	curities	Ac	quired,	Dis	posed of	, or B	enefi	icially	Owned						
1. Title of Security (Instr. 3) 2. Transa Date (Month/D					Execution Date,			Transaction Dispose Code (Instr.			rities Acquired (A) c ed Of (D) (Instr. 3, 4			Beneficia Owned F	s Illy ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) (D)	or F	Price	Reported Transacti (Instr. 3 a	ion(s)		[(Instr. 4)		
Common S	itock			10/25	5/2016		A		3,288(1)) <i>A</i>	1	\$34.21	17,275			D					
		٦									osed of, o				wned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,	4. Transaction Code (Instr. 8)				6. Date Exercis. Expiration Date (Month/Day/Yea		•	7. Title and Amou of Securities Underlying Derivative Securit (Instr. 3 and 4)		ecurity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securitie Beneficia Owned Following Reported Transacti (Instr. 4)	e s ally	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)		
						v	(A)	(A) (D) Care Expiration Date Exercisable Date Title Shares													
Non- qualified Stock Option (Right to Buy)	\$34.21	10/25/2016			A		14,187		10/25/201	7 ⁽²⁾	10/25/2023	Comm Stock		4,187	\$34.21	14,18	37	D			
Performance Shares	\$0	10/25/2016			A		6,577		09/30/201	9 ⁽³⁾	12/31/2019	Comm		5,577	\$0	6,57	7	D			

Explanation of Responses:

- 1. Restricted Stock Unit Grant which vest 25% per year over 4 years following the grant date. Grant was made under 2005 Long Term Incentive Compensation Plan.
- 2. Grant to reporting person of right to buy shares of common stock exercisable in annual increments of 25 percent beginning on the first anniversary of the date of grant.
- 3. Performance Share Units represent a right to receive one share of Haemonetics Corporation common stock for each Performance Share Unit based on the performance of Haemonetics stock price relative to the Total Shareholder Return of the companies comprising a blended index of the S&P MidCap 400 and S&P SmallCap 600. The number of Performance Share Units (and therefore the number of shares payable) will depend on the Company's stock price performance between October 1, 2016 and September 30, 2019. The Performance Share Units disclosed in column 5 represent a target amount. The number of shares ultimately issued could range from none to twice the target amount in column 5. The Performance Share Units were granted under the 2005 Haemonetics Corporation Long-Term Incentive Compensation Plan and are exempt under Rule 16b-3(d).

/s/ Alexander P. Steffan, attorney-in-fact for Mr. Ryding

10/27/2016

** 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.