SEC Form 4	
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 [*] Simon, Christopher				uer Name and Ticke EMONETICS					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owne				
(Last) (First) (Middle) 125 SUMMER STREET				te of Earliest Transa 8/2021	ction (N	lonth/[Day/Year)	_ x	Officer (give title below) Presider	Other below) nt & CEO	(specify		
(Street) BOSTON (City)	MA (State)	02110 (Zip)	4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person			
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned													
Date			2. Transaction Date (Month/Day/Year)	Execution Date,		3. Transaction Code (Instr. 8)			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 (D)		Price	Transaction(s) (Instr. 3 and 4)		(1150.4)	
Common Stoc	k	05/18/2021		A ⁽¹⁾		26,515 ⁽¹⁾	A	(2)	196,745 ⁽³⁾	D			

Common Stock					/2021				S ⁽⁴⁾	1,024	⁽⁴⁾ D	\$55.1	9 195,	721 ⁽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)	Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) if any			ate, T	Transaction of Code (Instr. Dr. 8) Se Ad Di of		of E		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 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)
				c	Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Non- qualified Stock Option (Right to Buy)	\$56.57	05/18/2021			A		71,733		(5)	05/18/2028	Common Stock	71,733	\$0	71,733	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 annual increments of 25% 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 the number of shares required to be sold by the reporting person to cover tax withholding obligations in connection with the vesting of certain RSUs previously reported in Table I following the date of grant. This sale is mandated by the Issuer's election under its 2019 Long Term Incentive Compensation Plan 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.

5. Option vests in annual increments of 25% beginning on the first anniversary of the date of grant.

/s/ Thomas V. Powers, attorney-05/20/2021

in-fact for Mr. Simon

** 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.