ABIOMED INC Form 3 October 04, 2005 UNITED STATES SECURITIES AND EXCHANGE COMMISSION **OMB APPROVAL** FORM 3 Washington, D.C. 20549 OMB 3235-0104 Number: January 31, **INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF** Expires: 2005 **SECURITIES** Estimated average burden hours per Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, response... 0.5 Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940 (Print or Type Responses) 1. Name and Address of Reporting 2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol Person * Statement ABIOMED INC [ABMD] LATAIF LOUIS E (Month/Day/Year) 09/29/2005 (Last) (First) (Middle) 4. Relationship of Reporting 5. If Amendment, Date Original

Person(s) to Issuer

_X__ Director ____ Officer

(Check all applicable)

(give title below) (specify below)

SEC 1473 (7-02)

10% Owner

_ Other

Filed(Month/Day/Year)

6. Individual or Joint/Group

Filing(Check Applicable Line)

Person

X Form filed by One Reporting

C/O ABIOMED, INC., 22 CHERRY HILL DRIVE

(Street)

DANVERS, MAÂ 001923

DANVERS	,A MAA U	01923			Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Beneficially Owned					
1.Title of Secu (Instr. 4)	rity		2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)			

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

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 control number.

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	Securities Une	3. Title and Amount of Securities Underlying Derivative Security		5. Ownership Form of	6. Nature of Indirect Beneficial Ownership
	Date Exercisable Expiration Date	(Instr. 4) Title	Amount or Number of	Price of Derivative Security	Derivative Security: Security Direct (D)	(Instr. 5)
	Dute		Shares		or Indirect (I)	

r

						(Instr. 5)	
Stock Option (right to buy) (1)	09/29/2006 <u>(2)</u>	09/29/2015	Common Stock	25,000	\$ 10.03	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
LATAIF LOUIS E C/O ABIOMED, INC. 22 CHERRY HILL DRIVE DANVERS, MA 001923	ÂX	Â	Â	Â		
Signatures						
/s/ Charles B. Haaser (attorney-in-fact)		10/04/20	005			
**Signature of Reporting Person		Date				

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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).
- (1) Grant to reporting person of option to buy the number of shares of Common Stock set forth in Table II, Column 3, under the ABIOMED, Inc. 2000 Stock Incentive Plan.
- (2) This option becomes exercisable in annual 20% increments commencing on the date shown in Table II, Column 2.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.