### Edgar Filing: HOLOGIC INC - Form 4

HOLOGIC Form 4 June 03, 201	15 Л Д								OMB AF	PROVAL	
Check th if no lon	Washington, D.C. 20549							OMB Number: Expires:	3235-0287 January 31, 2005		
subject t Section Form 4 o	5. SECURITIES								Estimated a burden hour response	verage	
Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, 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)											
Levy Lawrence M Sy			2. Issuer Name <b>and</b> Ticker or Trading Symbol HOLOGIC INC [HOLX]					5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (M		3. Date of Earliest Transaction				(Checl	k all applicable	)		
			(Month/Day/Year) 06/01/2015					X_ Director 10% Owner Officer (give title Other (specify below) below)			
Filed(Mor			endment, Date Original onth/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>				
BEDFORD, MA 01750 Person											
(City)		(Zip)					-	uired, Disposed of		-	
1.Title of Security (Instr. 3)				3. 4. Securities Acquired Transactior(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or			Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common Stock	06/01/2015			М	10,000	А	\$ 17.84	13,914	D		
Common Stock	06/01/2015			S	10,000	D	\$ 36.24 (1)	3,914	D		

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.

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# 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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amou Underlying Securi (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Ame or Nun of S
Non-qualified Stock Option (Right to Buy)	\$ 17.84	06/01/2015		М		10,000	01/01/2006	12/13/2015	Common Stock	10,

## **Reporting Owners**

Reporting Owner Name / Address		Relationsh		
1	Director	10% Owner	Officer	Other
Levy Lawrence M 35 CROSBY DRIVE BEDFORD, MA 01730	Х			
Signatures				
/s/ Anne M. Liddy, Attorney-Ir Levy	06/03/2015			

**\*\***Signature of Reporting Person

Date

## **Explanation of Responses:**

\* 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).

The transaction reported herein reflects an aggregate of sales at prices ranging from \$36.22 and \$36.25, inclusive. The Reporting Person

(1) further undertakes to provide upon request by the Commission staff, the Issuer, or a security holder of the Issuer, full disclosure with respect to the number of shares purchased at each separate price.

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.