Edgar Filing: HOLOGIC INC - Form 4

HOLOGIC	INC											
August 27, 2	2015											
FORM	14	STATES	SECU	DITIE	'C /		СПУ	NCECO	MMISSION	OMB AP	PROVAL	
Check th	Washington, D.C. 20549										3235-0287	
if no lon	aor										January 31, 2005	
subject to Section 16. Form 4 or						BENER	ICIA	AL OWN	ERSHIP OF	Estimated a burden hour response	verage	
Form 5 obligatio may con <i>See</i> Instr 1(b).	tinue. Section 17	(a) of the l	Public U	Itility I	Hol	ding Cor	npan	•	Act of 1934, 935 or Section			
(Print or Type	Responses)											
WILSON WAYNE Symbol			are realized and restor of reading					5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First) (Middle)	3. Date of Earliest Transaction (C				(Check	eck all applicable)				
35 CROSB	(Mont			nth/Day/Year) 25/2015				-	_X_ Director 10% Owner Officer (give title Other (specify below) below)			
BEDFORD	(Street) , MA 01730		4. If Am Filed(Mo			ate Origina r)	1		5. Individual or Joi Applicable Line) .X_ Form filed by Ou Form filed by Mo Person	ne Reporting Per	son	
(City)	(State)	(Zip)	Tab	le I - N	on-]	Derivative	Secu		ired, Disposed of,	or Beneficiall	v Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Transaction Date 2A. Deemed					es Ac ed of (quired (A) (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common					V	Amount	(D)	Price				
Stock	08/25/2015			М		12,774	А	\$ 18.82	51,989	D		
Common Stock	08/25/2015			S		12,774	D	\$ 38.7116 (1)	39,215	D		
Common Stock	08/26/2015			М		12,306	А	\$ 20.01	51,521	D		
Common Stock	08/26/2015			S		12,306	D	\$ 38.5	39,215	D		

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

Edgar Filing: HOLOGIC INC - Form 4

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 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	Amo or Nun of S
Non-qualified Stock Option (Right to Buy)	\$ 18.82	08/25/2015		М	12,774	(2)	01/01/2018	Common Stock	12,
Non-qualified Stock Option (Right to Buy)	\$ 20.01	08/26/2015		М	12,306	01/01/2014	01/01/2020	Common Stock	12,

Reporting Owners

Reporting Owner Name / Address		Relationsh					
	Director	10% Owner	Officer	Other			
WILSON WAYNE 35 CROSBY DRIVE BEDFORD, MA 01730	Х						
Signatures							
/s/ Anne M. Liddy, Attorney-In Wilson	08/27/2015						
**Signature of Reporting			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 price reported is the weighted average price per share. Shares were sold in multiple transactions at prices ranging from \$38.7000 to
 (1) \$38.7230 per share. The Reporting Person will provide, upon request by the Commission staff, the Issuer, or a securityholder of the Issuer, full information regarding the number of shares sold at each price.

(2) The option becomes fully vested on January 1, 2012.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Edgar Filing: HOLOGIC INC - Form 4

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.