## Edgar Filing: Cardiovascular Systems Inc - Form 4

	ar Systems Inc									
Form 4	,									
July 26, 2013								OMB A	PPROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									3235-0287	
if no long	Check this box if no longer subject to STATEMENT OF CHANG				GES IN BENEFICIAL OWNERSHIP OF SECURITIES				Expires: January 31, 2005 Estimated average	
Form 4 or		SECONTIES						burden hours per response		
Form 4 or Form 5 obligations may continue. See Instruction 1(b). Form 5 obligations may continue. See Instruction 1(b). Form 5 obligations may continue. See Instruction 1(c) (c) (c) (c) (c) (c) (c) (c) (c) (c)										
(Print or Type F	Responses)									
1. Name and A BETTERLE	er Name <b>and</b> Ticker or Trading vascular Systems Inc [CSII]				5. Relationship of Reporting Person(s) to Issuer					
(Last)	(First) (Mid		f Earliest Tra			]	(Cheo	ck all applicable	e)	
651 CAMPU	(Month/I	(Month/Day/Year) 07/24/2013				Director 10% Owner X Officer (give title Other (specify below) below) Chief Financial Officer				
(Street) 4. If Ame			ndment, Date Original				6. Individual or Joint/Group Filing(Check			
ST. PAUL, I	-				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(State) (Z	ip) Tab	e I - Non-D	erivative (	Securi	ties A c	quired, Disposed o	f or Beneficial	llv Owned	
1.Title of Security (Instr. 3)	2. Transaction Date	. Transaction Date 2A. Deemed			ties l (A) o l of (D	er P)	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	
Common Stock	07/24/2013		A <u>(1)</u>	3,286	А	\$0	205,375 <u>(2)</u>	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.

 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. Transacti Code (Instr. 8)	TransactionNumberExpiration DateCodeof(Month/Day/Year		Date	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price Deriva Securit (Instr. :
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (right to buy)	\$ 8.75					<u>(3)</u>	03/01/2019	Common Stock	14,234	

## Edgar Filing: Cardiovascular Systems Inc - Form 4

## **Reporting Owners**

Reporting Owner Name / Address			Relationships	
	Director	10% Owner	Officer	Other
BETTERLEY LAURENCE L 651 CAMPUS DRIVE ST. PAUL, MN 55112			Chief Financial Officer	
Signatures				

/s/ Scott J. Dorfman as Attorney-in-Fact for Laurence L. Betterley pursuant to Power of Attorney previously filed. 07/26/2013

\*\*Signature of Reporting Person

## **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 award was made pursuant to the terms of the reporting person's August 13, 2012 restricted stock award, which provided that an
  (1) additional amount of shares equal to 25% of the total number of shares subject to the award would be granted if total shareholder return for fiscal 2013 exceeded 110% of the median of the Company's peer group.
- (2) Includes 1,275 shares acquired on December 31, 2012 and 905 shares acquired on June 30, 2013 through the Issuer's Employee Stock Purchase Plan.
- (3) Fully exerciable.

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.

Date