Cardiovascular Systems Inc Form 4 May 05, 2014

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Expires: 2005 Estimated average burden hours per response... 0.5

OMB APPROVAL

3235-0287

January 31,

OMB

5. Relationship of Reporting Person(s) to

Issuer

Number:

Form 4 or Form 5 obligations may continue. See Instruction

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

2. Issuer Name and Ticker or Trading

1(b).

(Print or Type Responses)

Flaherty James E

1. Name and Address of Reporting Person *

•			Symbol	Symbol				issuci				
			Cardiova	Cardiovascular Systems Inc [CSII]					(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction				***					
			(Month/Da	ay/Year)				Director		Owner		
651 CAMPUS DRIVE 05			05/01/20	05/01/2014				_X_ Officer (giv below)	e title Other	er (specify		
								· · · · · · · · · · · · · · · · · · ·	dministrative Of	ficer		
	4. If Amer	4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check						
	Filed(Mon	Filed(Month/Day/Year)					Applicable Line)					
								X Form filed by				
ST. PAUL, MN 55112								Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	ecurit	ies Acq	uired, Disposed o	of, or Beneficial	ly Owned		
1.Title of	2. Transaction D	ate 2A. Dec	emed	3.	4. Securiti	ies Aco	quired	5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Yea	r) Executi	on Date, if	Transaction(A) or Disposed of			Securities	Form: Direct	Indirect			
(Instr. 3)		any	•		Code (D)			Beneficially	Beneficial			
		(Month	/Day/Year)	(Instr. 8)	(Instr. 3, 4 and 5)			Owned	Ownership			
								Following Reported	(Instr. 4)	(Instr. 4)		
						(A)		Transaction(s)				
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)				
				Jour V	. mount	(2)	11100					
Common	05/01/2014			S(1)	18,189	D		114,177	D			

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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)

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1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)		4. Transactio	5. orNumber	6. Date Exerc Expiration D		7. Title at Amount of		8. Price of Derivative	9. Nu Deriv
Security (Instr. 3)	or Exercise Price of Derivative Security	(monda, Day, Teal)	(Month/Day/Year)	Code (Instr. 8)	of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	(Month/Day/		Underlyin Securities (Instr. 3 a	ng s	Security (Instr. 5)	Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	or Title Nu of	nount umber uares		

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Flaherty James E 651 CAMPUS DRIVE ST. PAUL, MN 55112

Chief Administrative Officer

Signatures

/s/ Amanda Schmall as Attorney-in-Fact for James E. Flaherty pursuant to Power of Attorney filed herewith.

05/05/2014

**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).
- (1) In connection with the vesting and delivery of restricted stock and pursuant to a Rule 10b5-1 trading plan, on the date the shares were sold the net proceeds were used to pay required withholding taxes.

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.

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