Edgar Filing: Aronson Martha Goldberg - Form 4

Aronson Marth Form 4 August 30, 201	· ·									
FORM		STATES			PPROVAL 3235-0287					
Check this I if no longer subject to Section 16. Form 4 or Form 5 obligations may continu <i>See</i> Instruct 1(b).	STATEN Filed pur _{ie.} Section 17(Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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 Res	sponses)									
1. Name and Address of Reporting Person <u>*</u> Aronson Martha Goldberg			2. Issuer Name and Ticker or Trading Symbol Cardiovascular Systems Inc [CSII]				5. Relationship of Reporting Person(s) to Issuer			
(Last) 1225 OLD HI	3. Date of Earliest Transaction (Month/Day/Year) 08/28/2018				(Check all applicable) <u></u> Director <u></u> Officer (give title below) <u></u> Other (specify below)					
ST. PAUL, M	4. If Amendment, Date Original Filed(Month/Day/Year)			 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 						
(City)	(State)	(Zip)	Tab	ole I - Non-l	Derivative	Securities A	Person	of, or Beneficia	lly Owned	
	Transaction Date Ionth/Day/Year)	2A. Deemo Execution any (Month/Da	ed Date, if	3. Transactic Code (Instr. 8)	4. Securi	ties (A) or of (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	
Reminder: Report	on a separate line	e for each cl:	ass of sec	urities bene	Perso infor requi	ons who re nation con red to resp ays a curre	or indirectly. spond to the colle tained in this form ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)	

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount of	8. Pr
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof Derivative	Expiration Date	Underlying Securities	Deriv
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Acquired			(Inst

	Derivative Security				(A) orDisposed(D)(Instr. 3, and 5)					
			Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Restricted Stock Units	<u>(1)</u>						<u>(1)</u>	<u>(1)</u>	Common Stock	5,662
Restricted Stock Units	(2)	08/28/2018	А		3,527		(2)	(2)	Common Stock	3,527

Reporting Owners

Reporting Owner Name / Address		Relationsh	ips	
	Director	10% Owner	Officer	Other
Aronson Martha Goldberg 1225 OLD HIGHWAY 8 NW ST. PAUL, MN 55112	Х			
Signatures				
/s/ Amanda Lorentz as Attorney	v-in-Fact	for Martha C	Goldberg	g Aronson pursuant to Power of

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).

Each restricted stock unit represents the right to receive a payment from the Company equal in value to the market price per share of(1) Company common stock on the date of payment and shall be payable in cash or shares of Company common stock beginning six months following the termination of each director's board membership.

Each restricted stock unit represents the right to receive a payment from the Company equal in value to the market price per share of
 Company common stock on the date of payment and shall be payable in cash or shares of Company common stock beginning six months following the termination of each director's board membership; provided, however, that the restricted stock units vest in quarterly

amounts of 882 shares on each of September 30, 2018, December 31, 2018 and March 31, 2019 and 881 shares on June 30, 2019.

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.