Edgar Filing: West Thomas A. - Form 4

Form 4											
December 04, 2018 FORM 4 Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). UNITED STATES SECURITIES AND EXCHANGE C Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWN SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Section 17(a) of the Public Utility Holding Company Act of 194 30(h) of the Investment Company Act of 194						NERSHIP OF e Act of 1934, f 1935 or Section	OMB Number: Expires: Estimated a burden hour response	Number: 3235-0287 Expires: January 31 2005 Estimated average burden hours per			
(Print or Type Re	esponses)										
1. Name and Address of Reporting Person <u>*</u> West Thomas A.			2. Issuer Name and Ticker or Trading Symbol HOLOGIC INC [HOLX]					5. Relationship of Reporting Person(s) to Issuer			
(Last) (First) (Middle) 250 CAMPUS DRIVE			3. Date of Earliest Transaction (Month/Day/Year) 12/01/2018					(Check all applicable) <u>X</u> Officer (give title 10% Owner below) 0 below) Div President & GM, Diagnostic			
				If Amendment, Date Original led(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 			
	DUGH, MA 01							Person	iore man One Re	porung	
Security (Instr. 3)	(State) 2. Transaction Da (Month/Day/Year) Executio any	ned	a I - Non-D 3. Transactic Code (Instr. 8) Code V	4. Securi on(A) or Di (Instr. 3,	ties A spose	cquired d of (D) 5) Price	uired, Disposed of 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	
Common Stock	12/01/2018			F	1,011	D	\$ 44.41	55,753 <u>(1)</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)

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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)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	ate	7. Titl Amou Under Securi (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
I State and a state	Director 10% Owner		Officer	Other				
West Thomas A. 250 CAMPUS DRIVE MARLBOROUGH, MA 01752			Div President & GM, Diagnostic					
Signatures								
/s/ Patricia K. Dolan, attorney-ii	n-fact for	Mr.						
West			12/04/2018					
**Signature of Reporting Per	son		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) Includes 34,527 restricted stock units/performance share units, the settlement of which has been deferred pursuant to the Issuer's Deferred Equity Plan.

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.