HOLOGIC INC Form 4 May 19, 2005

FORM 4

Form 5

obligations

may continue.

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

Check this box if no longer subject to Section 16. Form 4 or

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

Symbol

OMB APPROVAL

OMB 3235-0287 Number:

January 31, Expires: 2005

Estimated average burden hours per response... 0.5

5. Relationship of Reporting Person(s) to

Issuer

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 See Instruction

2. Issuer Name and Ticker or Trading

1(b).

(Print or Type Responses)

LAVALLEE ROBERT H

1. Name and Address of Reporting Person *

		HOLO	HOLOGIC INC [HOLX]				(Check all applicable)		
(Mc			3. Date of Earliest Transaction Month/Day/Year) 05/18/2005				Director 10% Owner X Officer (give title Other (specify below) Vice President		Owner
(Street) 4. If Amer Filed(Mon BEDFORD, MA 01730				ate Origina r)	1		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City)	(State)	(Zip) Ta	ble I - Non-	Derivative	Securi	ities Acqı	uired, Disposed o	f, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year		xecution Date, if Transaction(A) or Disposed of (D) ny Code (Instr. 3, 4 and 5) Month/Day/Year) (Instr. 8) (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 Beneficial Ownership (Instr. 4)
Common Stock	05/18/2005		M	5,000	A	\$ 5	5,000	D	
Common Stock	05/18/2005		M	1,000	A	\$ 5.05	6,000	D	
Common Stock	05/18/2005		M	3,750	A	\$ 10.26	9,750	D	
Common Stock	05/18/2005		M	2,500	A	\$ 9.5	12,250	D	
Common Stock	05/18/2005		M	1,875	A	\$ 14.25	14,125	D	

Edgar Filing: HOLOGIC INC - Form 4

Common Stock 05/18/2005 S 14,125 D \$ 38 0 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.

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 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. Transactic Code (Instr. 8)	5. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amour Underlying Securit (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amo or Num of Share
Incentive Stock Option	\$ 5	05/18/2005		M	5,000	01/25/2001	10/25/2010	Common Stock	5,0
Incentive Stock Option	\$ 5.05	05/18/2005		M	1,000	10/01/2002	10/01/2011	Common Stock	1,0
Incentive Stock Option	\$ 9.5	05/18/2005		M	2,500	09/17/2003	09/17/2012	Common Stock	2,5
Non-Qualified Stock Option	\$ 10.26	05/18/2005		M	3,750	11/13/2002	11/13/2011	Common Stock	3,7
Non-Qualified Stock Option	\$ 14.25	05/18/2005		M	1,875	11/06/2004	11/06/2013	Common Stock	1,8

Reporting Owners

Reporting Owner Name / Address	Relationships						
Troporting of the relations	Director	10% Owner	Officer	Other			
LAVALLEE ROBERT H							
35 CROSBY DRIVE			Vice President				
BEDFORD, MA 01730							

Reporting Owners 2

Edgar Filing: HOLOGIC INC - Form 4

Signatures

Robert Lavallee 05/19/2005

**Signature of Date
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).

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.

Signatures 3