BIOMET INC Form 4 April 07, 2005

FORM 4

OMB APPROVAL

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

OMB 3235-0287 Number:

Check this box if no longer subject to Section 16.

January 31, Expires: 2005

5. Relationship of Reporting Person(s) to

Issuer

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

Estimated average burden hours per response... 0.5

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

Symbol

1(b).

(Print or Type Responses)

DOEDENS BART J

1. Name and Address of Reporting Person *

04/06/2005

| | | • | BIOMET INC [BMET] | | | | | (Check all applicable) | | | |
|---|--|---|-------------------|--|------------------------------|--|--|--|---|--|--|
| | | | | e of Earliest Transaction h/Day/Year) 5/2005 | | | | Director 10% Owner State of the control of the con | | | |
| (Street) 4. If Amendment, Date Original Filed(Month/Day/Year) STUART, FL 34996 | | | | | | 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) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | |
| 1.Title of Security (Instr. 3) | 2. Transaction Dat (Month/Day/Year) | | Code | | ispose 4 and (A) or | ed 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 | 04/06/2005 | | M | 1,250 | A | \$ 24 | 2,810 | D | | | |
| Common Stock | 04/06/2005 | | S | 900 | D | \$ 36.93 | 1,910 | D | | | |
| Common Stock | | | | | | | 1,292 | I | Biomet 401(k) Plan | | |
| Common Stock | | | | | | | 1,079 | I | Bmet Employee Stock | | |

S

100

D

15,860

Ι

Bonus Plan

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| Common Stock | | | | | \$ 36.74 | | | By revocable family trust |
|-----------------|------------|---|-------|---|-------------|--------|---|------------------------------------|
| Common Stock | 04/06/2005 | S | 100 | D | \$ 36.72 | 15,760 | I | By revocable family trust |
| Common Stock | 04/06/2005 | S | 2,600 | D | \$ 36.7 | 13,160 | I | By revocable family trust |
| Common Stock | 04/06/2005 | S | 396 | D | \$ 36.69 | 12,764 | I | By revocable family trust |
| Common Stock | | | | | | 160 | I | children of Reporting Person |
| Common Stock | | | | | | 225 | I | Reporting Person's IRA |
| Common Stock | | | | | | 70 | I | Spouse's IRA |

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 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. Transactic Code (Instr. 8) | 5. Number actiom Derivative Securities 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | |
|---|---|--------------------------------------|---|--|--|-----|--|--------------------|---|--|
| | | | | Code V | (A) (I | D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares |
| Employee Stck Option | \$ 24 | 04/06/2005 | | M | 1,2 | 250 | 07/18/2003 | 07/17/2005 | Common Stock | 1,250 |

(9-02)

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Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

DOEDENS BART J 36 SOUTH RIVER ROAD STUART, FL 34996

Vice President

Signatures

Jacqueline K. Huber, POA for Bart J.

Doedens 04/07/2005

**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).

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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