**BIOMET INC** Form 4 July 19, 2007

## FORM 4

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

Check this box if no longer

subject to Section 16. Form 4 or

Form 5 obligations

may continue. See Instruction 1(b).

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 Responses)

(Last)

(City)

1.Title of

Security

(Instr. 3)

1. Name and Address of Reporting Person \* LAMB SANDRA A

(First) (Middle)

420 LEXINGTON AVE., SUITE 300

(Street)

(State)

(Month/Day/Year)

(Zip)

2. Transaction Date 2A. Deemed

NEW YORK, NY 10170

2. Issuer Name and Ticker or Trading

Symbol

**BIOMET INC [BMET]** 

3. Date of Earliest Transaction (Month/Day/Year)

07/17/2007

4. If Amendment, Date Original

Filed(Month/Day/Year)

3. 4. Securities

Execution Date, if TransactionAcquired (A) or Code (Month/Day/Year) (Instr. 8)

Disposed of (D) (Instr. 3, 4 and 5)

(A)

or Code V Amount (D) Price 5. Relationship of Reporting Person(s) to

Issuer

(Check all applicable)

**OMB** 

Number:

Expires:

response...

Estimated average

burden hours per

**OMB APPROVAL** 

3235-0287

January 31,

2005

0.5

X\_ Director 10% Owner Officer (give title Other (specify below)

6. Individual or Joint/Group Filing(Check

Applicable Line) \_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

5. Amount of 7. Nature of 6. Ownership Securities Form: Direct Indirect Beneficially (D) or Indirect Beneficial Owned (I) Ownership Following (Instr. 4) (Instr. 4)

Transaction(s)

(Instr. 3 and 4)

Reported

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)

1. Title of Derivative Conversion Security or Exercise

3. Transaction Date 3A. Deemed (Month/Day/Year)

Execution Date, if any

5. Number Transaction of Derivative Expiration Date Code Securities

6. Date Exercisable and (Month/Day/Year)

7. Title and Amount of 8 **Underlying Securities** (Instr. 3 and 4)

SEC 1474

(9-02)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year) (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)						(			
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option	\$ 36.88	07/17/2007		D <u>(1)</u>			2,000	01/02/2006	01/01/2009	Common Stock	2,000	
Stock Option	\$ 41.6	07/17/2007		D(1)			2,000	01/03/2005	01/02/2008	Common Stock	2,000	

### **Reporting Owners**

Reporting Owner Name / Address	Relationships						
reporting of the relation	Director	10% Owner	Officer	Other			
LAMB SANDRA A 420 LEXINGTON AVE., SUITE 300 NEW YORK, NY 10170	X						

# **Signatures**

Jacqueline K. Huber POA for Sandra A. Lamb

07/19/2007

\*\*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).

Per the Agreement and Plan of Merger, dated as of December 18, 2006 (amended and restated as of June 7, 2007), among Biomet, Inc., LVB Acquisition, LLC and LVB Acquisition Merger Sub, Inc., the option was cancelled and the reporting person is entitled to receive an

(1) amount in cash equal to the product of (i) the total number of shares subject to the option immediately prior to July 17, 2007 multiplied by (ii) the excess, if any, of \$46.00 over the exercise price per share, less applicable taxes required to be withheld with respect to such payment.

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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