

GROVES RAY J
 Form 4
 April 02, 2003
 SEC Form 4

<p>FORM 4</p> <p>[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).</p>	<p>UNITED STATES SECURITIES AND EXCHANGE COMMISSION</p> <p>Washington, D.C. 20549</p> <p>STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP</p> <p>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(f) of the Investment Company Act of 1940</p>	<p>OMB APPROVAL</p> <p style="text-align: center;">—</p> <p>OMB Number: 3235-0287 Expires: January 31, 2005 Estimated average burden hours per response. 0.5</p>
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<p>1. Name and Address of Reporting Person*</p> <p>Groves, Ray</p> <p>(Last) (First) (Middle)</p> <p>One Boston Scientific Place</p> <p>(Street)</p> <p>Natick, MA 01760-1537</p> <p>(City) (State) (Zip)</p> <p>USA</p>	<p>2. Issuer Name and Ticker or Trading Symbol</p> <p>Boston Scientific Corporation (BSX)</p>	<p>4. Statement for (Month/Day/Year)</p> <p>March 31, 2003</p>	<p>6. Relationship of Reporting Person(s) to Issuer (Check all applicable)</p> <p><input checked="" type="checkbox"/> Director</p> <p><input type="checkbox"/> 10% Owner</p> <p><input type="checkbox"/> Officer</p> <p><input type="checkbox"/> Other</p> <p>Officer/Other Description _____</p> <p>7. Individual or Joint/Group Filing (Check Applicable Line)</p> <p><input checked="" type="checkbox"/> Individual Filing</p> <p><input type="checkbox"/> Joint/Group Filing</p>
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Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	3. Transaction Code and Voluntary Code (Instr. 8)	4. Securities Acquired (A) or Disposed (D) Of (Instr. 3, 4, and 5)	5. Amount of Securities Beneficially Owned at End of Month (Instr. 3 and 4)	6. Ownership Form: Direct(D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)

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		-				
		Code V	-	Amount A/D Price		

Reminder:
Report on a separate line for each class of securities beneficially owned directly or indirectly.
* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

(over)
SEC 1474
(3-99)

**Groves,
Ray -
March
2003**

**Form 4
(continued)**

**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)	4. Transaction Code and	5. Number of Derivative Securities Acquired (A)	6. Date Exercisable(DE) and Expiration Date(ED) (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr.5)	9. Number of Derivative Securities Beneficially Owned at End of	10. Ownership Form of Derivative
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			Voluntary (V) Code (Instr.8)	or Disposed (D) Of (Instr. 3,4 and 5)	— (DE) (ED)			Month (Instr.4)	Security Direct (D) or Indirect (I)
			Code V						
Stock Equivalent Units (1)	\$0.0000	03/31/2003	A	(A) 233		Common Stock - 233	\$42.8280	6,869	D

Explanation of Responses :

** Intentional
misstatements
or omissions
of facts
constitute
Federal
Criminal
Violations.

By: /s/ Lawrence J. Knopf,
Attorney-in-fact

04-02-2003

** Signature of Reporting Person
Date

See 18
U.S.C. 1001
and 15 U.S.C.
78ff(a).

Power of Attorney

Note: File
three copies of
this Form, one
of which must
be manually
signed. If
space is
insufficient,

See
Instruction 6
for procedure.

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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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Ray -
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**Form 4
(continued)**

**FOOTNOTE
Descriptions
for Boston
Scientific
Corporation
(BSX)**

Form 4 -
March 2003

**Ray Groves
One Boston
Scientific Place**

**Natick, MA
01760-1537**

**—
Explanation of
responses:**

**(1) Stock
equivalent units
were acquired by
the Reporting
Person pursuant
to the Boston
Scientific
Corporation
Deferred
Compensation
Program.**

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