Edgar Filing: Cardiovascular Systems Inc - Form SC 13G

Cardiovascular Systems Inc Form SC 13G February 10, 2014

SECURITIES AND EXCHANGE COMMISSION WASHINGTON, D.C. 20549

SCHEDULE 13G

INFORMATION TO BE INCLUDED IN STATEMENTS FILED PURSUANT TO RULES 13d-1(b), (c), AND (d) AND AMENDMENTS THERETO FILED PURSUANT TO RULE 13d-2

	(AMENDMENT NO.)*
	Cardiovascular Systems, Inc.
	(Name of Issuer)
	Common Stock
	(Title of Class of Securities)
	141619106
	(CUSIP Number)
	12/31/2013
(Date	of Event Which Requires Filing of this Statement)

Check the appropriate box to designate the rule pursuant to which this Schedule is filed:

X	Rule 13d-1(b)
O	Rule 13d-1(c)
0	Rule 13d-1(d)

^{*}The remainder of this cover page shall be filled out for a reporting person's initial filing on this form with respect to the subject class of securities, and for any subsequent amendment containing information which would alter the disclosures provided in a prior cover page.

The information required in the remainder of this cover page shall not be deemed to be "filed" for the purpose of Section 18 of the Securities Exchange Act of 1934 ("Act") or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, see the Notes).

Page 1 of 4 Pages

CUSIP NO. 141619106	13G	Page 2 of 4 Pages
1. NAI	ME OF REPORTING PERSONS	
Massachusetts Financial Services Company ("MFS")	
2. CHECK THE APPR (SEE INSTRUCTIONS)	OPRIATE BOX IF A MEMBER	OF A GROUP
a) o (b) o		
Not Applicable		
3.	SEC USE ONLY	
4. CITIZENS	HIP OR PLACE OF ORGANIZA	TION
Delaware		
NUMBER OF SHARES BENEFICIALLY O	WNED BY EACH REPORTING	PERSON WITH:
5.	SOLE VOTING POWER	
1,535,540 shares of common stock		
6.	SHARED VOTING POWER	
None		
7. S	SOLE DISPOSITIVE POWER	
1,627,140 shares of common stock		
8. SH	IARED DISPOSITIVE POWER	
None		
9. AGGREGATE AMOUNT BEN	NEFICIALLY OWNED BY EACH	H REPORTING PERSON
1,627,140 shares of common stock, consisting non-reporting entities.	g of shares beneficially owned by	MFS and/or certain other
10.CHECK IF THE AGGREGATE AMOUN INSTRUCTIONS)	NT IN ROW (9) EXCLUDES CER	CTAIN SHARES (SEE o
Not Applicable		
11. PERCENT OF CLA	ASS REPRESENTED BY AMOU	NT IN ROW 9

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5.8		
12.	TYPE OF REPORTING PERSON (SEE INSTRUCTIONS)	
IA		

Schedule	e 13G		Page 3 of 4 Pages
ITEM 1:	M 1: NAME OF ISSUER:		NAME OF ISSUER:
See Cov	er Page		
(b)	ADDRESS OF IS	SSUER'S PRINCIPA	L EXECUTIVE OFFICES:
	npus Drive MN 55112		
ITEM 2:		(a)	NAME OF PERSON FILING:
See Item	1 on page 2		
	(b) Al	DDRESS OF PRINC	IPAL BUSINESS OFFICE OR, IF NONE, RESIDENCE:
	tington Avenue MA 02199		
(c)	CITIZENSHIP:		
See Item	4 on page 2		
(d)	TITLE OF CLAS	SS OF SECURITIES:	
See Cov	er Page		
(e)	CUSIP NUMBER	₹:	
See Cov	er Page		
ITEM 3: Rule 13d	1-1(b)(1)(ii)(E)	The person filin	g is an investment adviser in accordance with
ITEM 4:			OWNERSHIP:
(a)	AMOUNT BENE	EFICIALLY OWNEI):
See Item	9 on page 2		
(b)	PERCENT OF CLASS:		
See Item	11 on page 2		
(c)NUN	MBER OF SHARE	S AS TO WHICH S	JCH PERSON HAS VOTING AND DISPOSITIVE POWERS

(SOLE AND SHARED):

See Ite	ems 5-8	3 on	page	2
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ITEM 5: OWNERSHIP OF FIVE PERCENT OR LESS OF A CLASS:

O

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ITEM 6: OWNERSHIP OF MORE THAN FIVE PERCENT ON BEHALF OF ANOTHER PERSON:

Not Applicable

ITEM IDENTIFICATION AND CLASSIFICATION OF THE SUBSIDIARY WHICH ACQUIRED THE 7: SECURITY BEING REPORTED ON BY THE PARENT HOLDING COMPANY OR CONTROL PERSON:

Not Applicable

ITEM 8: IDENTIFICATION AND CLASSIFICATION OF MEMBERS OF THE GROUP:

Not Applicable

ITEM 9: NOTICE OF DISSOLUTION OF GROUP:

Not Applicable

ITEM 10: CERTIFICATIONS:

By signing below I certify that, to the best of my knowledge and belief, the securities referred to above were acquired and are held in the ordinary course of business and were not acquired and are not held for the purpose of or with the effect of changing or influencing the control of the issuer of the securities and were not acquired and are not held in connection with or as a participant in any transaction having that purpose or effect.

SIGNATURE

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Date: February 7, 2014

Massachusetts Financial Services Company

By: /s/ DANIEL W. FINEGOLD

Daniel W. Finegold

Vice President and Assistant Secretary