FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OMB Number: Estimated average burden hours per response: 0.5

## 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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*  Peters William S					2. Issuer Name and Ticker or Trading Symbol Sunshine Heart, Inc. [ SSH ]									Relationship of Reporting Person(s) to Issuer (Check all applicable) Director  10% Owner				
(Last) 12988 VA	,	rst) (		3. Date of Earliest Transaction (Month/Day/Year) 01/08/2014							X	X Officer (give title Other (specify below) below)  CTO & Medical Director						
(Street) EDEN PRAIRIE MN 55344					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Inc Line)	Forr Forr	vidual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting			
(City)	(S		Zip)											Pers				
Date (Month/				2. Transa	ction	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			(A) or	5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	V	Amount		(A) or (D)	Price	(Instr.	action(s) . 3 and 4)			
Common	Stock			01/08/	2014			F		329	4	D	\$10.18	1 2	26,576	D	D.	
Common	Stock														7,250	I	By Peters JAM Trust	
Common Stock														3	33,433	I	By Peters Apollo Trust	
Common Stock															35	I	By Daughter	
Common Stock														53		I	By Son -	
Common Stock														35		I	By Son - II	
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)	rative Conversion Date Execution or Exercise (Month/Day/Year) if any		n Date, Transaction Code (Ins		on of		Expiration	6. Date Exercisa Expiration Date (Month/Day/Yea		Amo Sec Und Deri Sec	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
	of Respons				Code V	(	A) (D)	Date Exercisa		Expiration Date	Title	or Nur of	nber					

Gayle C. Aiken, by Power of <u>Attorney</u> \*\* Signature of Reporting Person

01/10/2014

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).