Edgar Filing: COOPER COMPANIES INC - Form 4

COOPER C Form 4 April 05, 20	COMPANIES INC										
FORM	ЛЛ	STATES SH	ECURITIES /	AND EX	CH/	ANGE C	OMMISSION	OMB AF	PROVAL		
Check the			Washington				0	Number:	3235-0287 January 31,		
if no lor subject Section		NGES IN BENEFICIAL OWNE SECURITIES				Expires: 20 Estimated average burden hours per					
Form 4 Form 5 obligation may corn <i>See</i> Inst 1(b).	Filed pur ons Section 17((a) of the Pub	tion 16(a) of the lic Utility Hole the Investment	lding Co	mpar	ny Act of	1935 or Section	response	0.5		
(Print or Type	Responses)										
1. Name and AREMMEL	mbol					5. Relationship of Reporting Person(s) to Issuer					
			OOPER COMPANIES INC [COO]				(Check all applicable)				
(Month.			fonth/Day/Year) 4/04/2017	-				Director 10% Owner X Officer (give title Other (specify below) Pres & CEO - CooperSurgical			
			If Amendment, D led(Month/Day/Yea	-	al		6. Individual or Joint/Group Filing(Check Applicable Line)				
PLEASAN	TON, CA 94588						_X_ Form filed by Or Form filed by Mo Person				
(City)	(State)	(Zip)	Table I - Non-	Derivative	e Secu	rities Acqu	iired, Disposed of,	or Beneficiall	y Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Dat any	Code Year) (Instr. 8)	onor Dispos (Instr. 3, 4	ed of	5) Price	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	04/04/2017		S	3,605	D	\$ 199.992 ⁷ (1)	7 0	D			

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 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. orNumber of Derivative Securities 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)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address		Relationships							
		Director	10% Owner	Officer	Other				
REMMELL PAUL L 6140 STONERIDGE MALI SUITE 590 PLEASANTON, CA 94588				Pres & CEO - CooperSurgical					
Signatures									
/s/ Paul L. Remmell	04/04/201	.7							

**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).
- (1) The price represents an average of sale prices between \$199.94 and \$200.08

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.