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COOPER CC Form 4	MPANIES INC											
December 22												
FORM	4 UNITED S	TATES				ND EXC D.C. 205		NGE (COMMISSION		9PROVAL 3235-0287	
Check this box if no longer subject to Section 16. Form 4 or						BENEFI TIES	CIAI	burden hou	Lanuary 31Expires:2005Estimated averageburden hours perresponse0.5			
Form 5 obligation may contin <i>See</i> Instruct 1(b).	s Section 17(a) of the		ility H	oldi	ing Com	pany	Act o	ge Act of 1934, f 1935 or Sectio 40	n		
(Print or Type R	esponses)											
KAUFMAN CAROL R Symbol				er Name and Ticker or Trading					5. Relationship of Reporting Person(s) to Issuer			
(Last) (First) (Middle) 3. Date (Month				Date of Earliest Transaction Month/Day/Year) 2/22/2015					(Check all applicable) <u></u> Director <u></u> 10% Owner <u>X</u> Officer (give title <u></u> Other (specify below) EVP, Sec. & Chief Gov. Officer			
				Amendment, Date Original d(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
PLEASANT	ON, CA 94588								Form filed by M Person			
(City)	(State) (2	Zip)	Table	e I - Nor	1-De	erivative S	ecuri	ties Aco	quired, Disposed of	f, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	med on Date, if Day/Year)	Code (Instr.	8)	4. Securi nAcquirec Disposec (Instr. 3, Amount	l (A) o l of (D 4 and (A) or)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial	
Common Stock	12/22/2015			G		233	D	\$0	39,532	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. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne 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			
KAUFMAN CAROL R 6140 STONERIDGE MALL DRIVE SUITE 590 PLEASANTON, CA 94588			EVP, Sec. & Chief Gov. Officer				
Signatures							

/s/ Carol R. Kaufman

12/22/2015

**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).

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.