Edgar Filing: COHERENT INC - Form 4

| COHERENT INC Form 4 | С | | | | | | | | | | |
|--|--|--|--|---|--|---|---|--|--------------------------|-----|--|
| March 06, 2015 | | | GEGU | | | | | | PPROVAL | | |
| | UNITED | STATES | | RITIES A shington | | | COMMISSIO | N OMB Number: | 3235-02 | .87 | |
| Check this box if no longer subject to Section 16. Form 4 or Form 5 | | NGES IN SECUF 16(a) of th | Estimated burden hou response | Expires:January 31, 2005Estimated average burden hours per response0.5 | | | | | | | |
| obligations may continue. See Instructior 1(b). | | | | • | • | npany Act ay Act of 1 | of 1935 or Secti 940 | on | | | |
| (Print or Type Respo | onses) | | | | | | | | | | |
| 1. Name and Address of Reporting Person <u>*</u> SKAGGS STEPHEN A | | | 2. Issuer Name and Ticker or Trading Symbol COHERENT INC [COHR] | | | | 5. Relationship of Reporting Person(s) to Issuer | | | | |
| (Last) | (Last) (First) (Middle) | | | | ransaction | | (Check all applicable) | | | | |
| 5100 PATRICK HENRY DRIVE | | | (Month/Day/Year) 03/04/2015 | | | | X_ Director 10% Owner Officer (give title Other (specify below) below) | | | | |
| SANTA CLARA | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| (City) | (State) | (Zip) | Tab | ole I - Non-I | Derivative | Securities A | cquired, Disposed | of. or Beneficia | llv Owned | | |
| | ansaction Date hth/Day/Year) | 2A. Deemo Execution any (Month/Da | ed Date, if | 3. Transactio Code (Instr. 8) Code V | 4. Securiti nAcquired Disposed (Instr. 3, 4 | es (A) or of (D) | 5. Amount of | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect | | |
| Reminder: Report or | n a separate line | e for each cla | ass of sec | urities benef | ficially own | ned directly | or indirectly. | | | | |
| | | | | | inform requir | nation cont ed to resp ys a curre | spond to the colle tained in this forn ond unless the fo ntly valid OMB co | n are not rm | SEC 1474 (9-02) | | |

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of | 2. | 3. Transaction Date | 3A. Deemed | 4. | 5. Number | 6. Date Exercisable and | 7. Title and Amount of |
|-------------|-------------|---------------------|--------------------|------------|-----------------|-------------------------|------------------------|
| Derivative | Conversion | (Month/Day/Year) | Execution Date, if | Transactio | onof Derivative | Expiration Date | Underlying Securities |
| Security | or Exercise | | any | Code | Securities | (Month/Day/Year) | (Instr. 3 and 4) |
| (Instr. 3) | Price of | | (Month/Day/Year) | (Instr. 8) | Acquired | | |

| | Derivative Security | | | | (A) or Disposed of (D) (Instr. 3, 4, and 5) | | | | | |
|------------------------------|------------------------|------------|------|---|--|-----|------------------|--------------------|-----------------|--------------------------------------|
| | | | Code | V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amoun or Numbe of Shares |
| Restricted Stock Units | \$ 0 | 03/04/2015 | А | | 3,500 | | 02/15/2016(1) | 02/15/2016 | Common Stock | 3,500 |

Reporting Owners

Reporting Owner Name / AddressRelationshipDirector0% OwnerOfficerOtherSKAGGS STEPHEN A
5100 PATRICK HENRY DRIVE
SANTA CLARA, CA 95054XVVSignatures
attorneyNVVV'*Signature of Reporting PersonDateDate

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 Reporting Person is entitled to receive one share of common stock for each restricted stock unit. The Restricted Stock Units will be fully vested on February 15, 2016.

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.