Edgar Filing: COHU INC - Form 4

Form 4	15										
FORM 4 Check this box	UNITEI	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB APPROVAL OMB 3235-028 Number: January 31	
if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. <i>See</i> Instruction 1(b).	Filed pr Section 17	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940							Estimated a burden hou response	Expires: 2005 Estimated average burden hours per response 0.5	
(Print or Type Respo	onses)										
1. Name and Address of Reporting Person <u>*</u> Muller Luis A			2. Issuer Name and Ticker or Trading Symbol COHU INC [COHU]				g	5. Relationship of Reporting Person(s) to Issuer			
(Lost)	(First)				-			(Check all applicable)			
(Mon			(Month/Da	3. Date of Earliest Transaction (Month/Day/Year) 12/28/2015				Director I 0% Owner X_ Officer (give title Other (specify below) President & CEO			
	(Street) 4. If Amer Filed(Mont				e Original			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
POWAY, CA 92	2064							Form filed by Person			
(City)	(State)	(Zip)	Table	I - Non-De	erivative S	Securi	ties Aco	quired, Disposed o	of, or Beneficial	lly Owned	
	Transaction D Ionth/Day/Yea	ar) Executio any	med on Date, if Day/Year)	3. Transactic Code (Instr. 8) Code V	Disposed (Instr. 3,	l (A) o l of (D)	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 12 Stock	2/28/2015			F	4,013 (1)	D	\$0	231,207 (2)	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)

Edgar Filing: COHU INC - Form 4

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. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Muller Luis A 12367 CROSTHWAITE CIRCLE POWAY, CA 92064			President & CEO				
Signatures							
Jeffrey D. Jones (Attorney-in-Fact)	12/3	30/2015					
<u>**</u> Signature of Reporting Person	1	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) Represents shares that were automatically withheld upon vesting of restricted stock (RSUs) to cover tax obligations in a transaction exempt under Rule 16(b)-3.

Number of shares includes 162,911 Restricted Stock Units (RSU) (excluding the impact of shares that will be withheld to cover tax obligations) previously reported that in the future will be converted on a one-for-one basis into shares of Cohu, Inc. Common Stock,

(2) obligations) previously reported that in the future will be converted on a one-tor-one basis into shares of cond, inc. Common stock, immediately upon vesting which vesting is scheduled to occur in annual installments (assuming continued employment and achievement of specified performance goals).

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.