

COOPER COMPANIES INC

Reported by
RUBENSTEIN ALLAN E

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 11/16/17 for the Period Ending 11/15/16

Address	6140 STONERIDGE MALL RD STE 590 PLEASANTON, CA, 94588
Telephone	9254603600
CIK	0000711404
Symbol	COO
SIC Code	3851 - Ophthalmic Goods
Industry	Medical Equipment, Supplies & Distribution
Sector	Healthcare
Fiscal Year	10/31

FORM 4

**UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549**

OMB APPROVAL
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 -* RUBENSTEIN ALLAN E (Last) (First) (Middle) 6140 STONERIDGE MALL DRIVE, SUITE 590 (Street) PLEASANTON, CA 94588 (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol COOPER COMPANIES INC [COO]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director _____ 10% Owner _____ Officer (give title below) _____ Other (specify below)
3. Date of Earliest Transaction (MM/DD/YYYY) <p align="center">11/15/2016</p>		6. Individual or Joint/Group Filing (Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person
4. If Amendment, Date Original Filed (MM/DD/YYYY)		

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Trans. Date	2A. Deemed Execution Date, if any	3. Trans. Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			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)
			Code	V	Amount	(A) or (D)	Price			
Common Stock	11/15/2017		M		1649	A	(1)	7134	D	

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

1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans. Date	3A. Deemed Execution Date, if any	4. Trans. Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	V	(A)	(D)	Date Exercisable	Expiration Date						Title
Restricted Stock Units	(1)	11/15/2016		A		1649		(2)	(3)	Common Stock	1649	\$0	1649	D	
Restricted Stock Units	(1)	11/15/2017		M		1649		(2)	(3)	Common Stock	1649	(1)	0	D	
Restricted Stock Units	(1)	11/15/2017		A		1208		(4)	(3)	Common Stock	1208	\$0	1208	D	

Explanation of Responses:

- (1) RSU Exercise Price: There is no exercise price associated with the grant of Restricted Stock Units.
- (2) NED RSU Grant 11/15/16: RSUs will vest and release on the first anniversary of the date of grant 11/15/2017.
- (3) RSU Expiration Date: This award has no expiration date. Units will either vest or be forfeit.
- (4) NED RSU Grant 11/15/17: RSUs will vest and release on the first anniversary of the date of grant, 11/15/2018.

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
RUBENSTEIN ALLAN E 6140 STONERIDGE MALL DRIVE SUITE 590 PLEASANTON, CA 94588	X			

Signatures

/s/ Allan E. Rubenstein, M.D.

11/16/2017

**Signature of Reporting Person

Date

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

* 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.

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.