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COONEY CODE

| Form 4 August 04, 2 | | | | | | | | | | | |
|--|-----------------------------------|---|--|---|-------------------------|--|---|---|--|--------------------|----------------------|
| FORM | | | | | | | | | OMB A | PPROVA | L |
| | UNITED | STATES | | RITIES A | | | GE COMMISS | ION | OMB Number: | 3235-0 | 0287 |
| Check th if no lon subject to Section Form 4 Form 5 obligation | o STATEN 16. or Filed pu | 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 Sectio | | | | | | | Estimated average burden hours per response 0. | | y 31, 2005 0.5 |
| may con <i>See</i> Inst 1(b). | lunue. | | | nvestmen | • | • • | | | | | |
| (Print or Type | Responses) | | | | | | | | | | |
| Coheraidan Janma A | | | 2. Issue Symbol | er Name an o | 5. Relationsl Issuer | 5. Relationship of Reporting Person(s) to Issuer | | | | | |
| | | | COGN | EX COR | | (Check all applicable) | | | | | |
| (Mont | | | (Month/ | Date of Earliest Transaction Aonth/Day/Year) | | | X Direct | X_ Director 10% Owner | | | |
| ONE VISIO | ON DRIVE | | 08/03/2 | 2016 | | | Officer (give title Other (specify below) below) | | | | |
| | | | | f Amendment, Date Original d(Month/Day/Year) | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | | |
| NATICK, I | MA 01760 | | | | | | | | ore than One R | | |
| (City) | (State) | (Zip) | Tab | le I - Non-l | Derivative | Securities | s Acquired, Dispos | sed of, | or Beneficia | lly Owned | 1 |
| 1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if any (Month/Day/Year) | | Date, if | 3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) | | | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) | Fc (D (I) | 6. Ownership Form: Direct D) or Indirect I) Instr. 4) | 7. Nature Indirect Beneficia Ownershi (Instr. 4) | l | |
| | | | | Code V | Amount | or (D) Pri | (Instr. 3 and 4) | | | | |
| Reminder: Re | port on a separate line | e for each cl | ass of sec | urities bene | Perso | ns who i | ly or indirectly. respond to the contained in this f | | | SEC 1474 (9-02) | |

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

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| | Derivative Security | | | or Disposed of (D) (Instr. 3, 4, and 5) | | | | | | |
|---|------------------------|------------|------|--|--------|-----|---------------------|--------------------|-----------------|------------------------|
| | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Am or Nu of S |
| Non-Qualified Stock Option (right to buy) | \$ 48.54 | 08/03/2016 | А | | 20,000 | | 08/03/2017 | 08/03/2026 | Common Stock | 20 |

Reporting Owners

| Reporting Owner Name / Addre | SS | Relationships | | | | | | | |
|--|------------|---------------|---------|-------|--|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | | |
| Schneider Jerry A. ONE VISION DRIVE NATICK, MA 01760 | X | | | | | | | | |
| Signatures | | | | | | | | | |
| Jerry A. Schneider | 08/04/2016 | | | | | | | | |

<u>**</u>Signature of Reporting Person

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Date

** 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.