FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, D.O. 20040

| | OMB APF | PROVAL |
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| DCLUD | OMB Number: | 3235-03 |

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* <u>Golden Randal</u> | | | | | 2. Issuer Name and Ticker or Trading Symbol COOPER COMPANIES INC [COO] | | | | | | | | | | | neck all appl Direct | icable) or | ng Per | son(s) to Iss | vner | |
| (Last) 6140 ST | ` | First) GE MALL ROAD | (Middle) | 590 | 3. Date of Earliest Transaction (Month/Day/Year) 12/09/2014 | | | | | | | | | | | A below | r (give title) VP, Gene | ral C | Other (s below) ounsel | зреспу | |
| (Street) | Street) PLEASANTON CA 94588 | | | | 4. If | 4. If Amendment, Date of 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) | (| · | (Zip) | | | | | | | | | | | | | | | | | | |
| Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | action | action 2A. Deemed Execution Date, | | | ,, | 3. 4. Securit Transaction Disposed Code (Instr. 5) | | | | cquired | d (A) or | 5. Amor Securiti Benefic Owned | int of es ially Following | Form (D) o | n: Direct r Indirect istr. 4) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | Ī | Code | v | | | (A) or (D) | Price | Reporte Transac (Instr. 3 | ction(s) | | | (Instr. 4) | | |
| Common Stock | | | | | | | | | | | | | | 1, | 1,690 | | D | | | | |
| | | ٦ | | Derivat (e.g., p | | | | | | | | | | | | / Owned | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | e (Month/Day/Year) | 3A. Deeme Execution if any (Month/Da | Date, 1 | 4. Transac Code (I | | | | 6. Date Exercisal Expiration Date (Month/Day/Year | | | Amount o | | unt of rities rlying ative S | | 8. Price of Derivative Security (Instr. 5) | 9. Numbe derivative Securities Beneficia Owned Following Reported Transactie (Instr. 4) | e S Illy | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exe | e ercisable | | epiration ate | Title | 1 0 | Amount or Number of Shares | | | | | | |
| Employee Stock Option (Right to Buy) | \$162.28 | 12/09/2014 | | | Α | | 4,107 | | | (1) | 12 | 2/09/2024 | Comi | | 4,107 | \$0 | 4,107 | 7 | D | | |
| Restricted Stock | \$0 ⁽²⁾ | 12/09/2014 | | | A | | 1,232 | | | (3) | | (4) | Comi | | 1,232 | \$0 | 1,232 | 2 | D | | |

Explanation of Responses:

- $1.\,12/9/14$ NQ Grant: The options will vest in equal increments over five years measured from the date of grant as follows: 1/5 shall vest on 12/9/15; 1/5 shall vest on 12/9/16; 1/5 shall vest on 12/9/19.
- 2. RSU Exercise Price: There is no exercise price associated with the grant of Restricted Stock Units.
- $3.\ 12/9/14\ RSU\ Grant\ -\ Vesting\ Date:\ The\ grant\ vests\ in\ equal\ portions\ on\ the\ following\ dates:\ 1/8/16,\ 1/8/17,\ 1/8/18,\ 1/8/19\ and\ 1/8/20.$
- 4. RSU Expiration Date: This award has no expiration date. Units will either vest or be forfeit.

/s/ Randal Golden 12/10/2014

** 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 Number.