Edgar Filing: II-VI INC - Form 4

II-VI INC													
Form 4													
March 21, 20	017												
FORM	14									OMB AF	PROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								COMMISSION	OMB Number:	3235-0287			
Check th				-						Expires:	January 31,		
if no long subject to		MENT O	F CHAN	IGES IN BENEFICIAL OWNERSHI					NERSHIP OF	Estimated a	2005		
Section 1					SECURITIES					burden hours per			
Form 4 o			~ • •			~ .				response 0			
Form 5 obligatio	n o *							•	e Act of 1934,				
may cont				•		•	· ·		1935 or Sectior	1			
See Instr	uction	30(h)	of the In	vestme	ent	Compan	y Ac	t of 194	0				
1(b).													
(Print or Type I	Responses)												
× 51	1 /												
1. Name and Address of Reporting Person [*] 2. Issuer Name and Ticker or Trading 5. Relations							5. Relationship of	of Reporting Person(s) to					
RAYMOND MARY JANE Symbo				Symbol II-VI INC [IIVI]					Issuer				
									(Check all applicable)				
(Last) (First) (Middle) 3. Date of				of Earliest Transaction (Ch					(Check	eck all applicable)			
() () () () () () () () () ()				Month/Day/Year)					Director 10% Owner				
C/O II-VI II	NCORPORATE	D, 375	03/20/2	-	·				$X_ Officer (give$		er (specify		
SAXONBU	RG BLVD								below)	below) CFO			
	(Street)		1 If Ame	ndmant	Da	ta Origina			6 Individual or Io	int/Group Filin	g(Chaok		
				4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line)				
riicu(Mo				u(monul/Day/1cal)					_X_ Form filed by One Reporting Person				
SAXONBU	RG, PA 16056								Form filed by M Person	ore than One Re	porting		
		(77.)											
(City)	(State)	(Zip)	Tabl	e I - No	n-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of	2. Transaction Da	te 2A. Deer	med	3.		4. Securi			5. Amount of	6. Ownership			
Security	(Month/Day/Year		Execution Date, if			n(A) or Di			Securities	Form: Direct Indire			
(Instr. 3)		any (Month/l	Day/Year)	Code (Instr. 3, 4 and 5) (Instr. 8)				5)	Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership		
		Jayr (msu. 6)					Following	(Instr. 4)	(Instr. 4)				
							(A)		Reported				
							or		Transaction(s)				
				Code	V	Amount	(D)	Price	(Instr. 3 and 4)				
Common Stock	03/20/2017			F		6,873 (1)	D	\$ 36.75	42,523	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)

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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. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne 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						
I B	Director	10% Owner	Officer	Other			
RAYMOND MARY JANE C/O II-VI INCORPORATED 375 SAXONBURG BLVD SAXONBURG, PA 16056			CFO				
Signatures							
/s/ Jeffrey W. Acre, Attorney-in-Fact		03/21/201	7				
<u>**</u> Signature of Reporting Person		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) These shares were withheld by the Company to discharge withholding tax obligations of the reporting person and do not constitute an actual sale or other open-market transaction.

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.