## Edgar Filing: KUMMER RAYMOND B - Form 4

KUMMER	RAYMOND B											
Form 4												
August 31,	2017											
FORM			TOU	DIFIE					OMB AF	PROVAL		
. •	UNITED	STATES S		RITIES A				OMMISSION	OMB Number:	3235-0287		
Check	his box		vv a	ishington	I, D.C. 2	0349				January 31,		
if no lo		<b>MENT OF</b>	CHAI	NGES IN	BENE	FICL	AL OWN	ERSHIP OF	Expires:	2005		
subject Section	10				IGES IN BENEFICIAL OWNERSHIP OF SECURITIES					Estimated average		
Form 4				SECONTIES					burden hours per response 0.5			
Form 5	Filed put	rsuant to Se	ction	16(a) of tl	he Secur	ities	Exchange	Act of 1934,		0.0		
obligati may co		(a) of the Pu	ıblic U	Jtility Hol	lding Co	mpar	ny Act of	1935 or Section	L			
See Ins		30(h) of	f the I	nvestmen	t Compa	iny A	ct of 1940					
1(b).												
(Drint on Type	Desmonaes)											
(Print or Type	(Kesponses)											
1. Name and	Address of Reporting	Person *	2 Icen	er Name <b>an</b>	d Ticker (	vr Trad	ling	5. Relationship of I	Reporting Pers	son(s) to		
	RAYMOND B		ymbol					Issuer				
COGENT COMMUNICATIONS												
		H	IOLD	INGS, IN	IC. [CCO	DI]		(Check	all applicable	2)		
(Last)	(First) (	Middle) 3	. Date o	of Earliest T	Fransaction	n		Director	10%	Owner		
(Mont								XOfficer (give titleOther (specify below)				
2450 N ST	NW	0	8/30/2	2017				· · · · · · · · · · · · · · · · · · ·	Optical Trans	port		
	4	4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check					
				onth/Day/Yea	-			Applicable Line)	1	0		
								X_Form filed by O				
WASHING	GTON, DC 20037						-	Form filed by M Person	ore than One Re	porting		
(City)	(State)	(Zip)	Tab	ole I - Non-	Derivativ	e Secu	ırities Acqu	ired, Disposed of,	or Beneficial	ly Owned		
1.Title of	2. Transaction Date	2A. Deemed		3.	4. Securi	ties A	cquired (A)	5. Amount of	6.	7. Nature of		
Security	(Month/Day/Year)	Execution Date, if any		if Transactionor Disposed of (D) Code (Instr. 3, 4 and 5)				Securities	Ownership	Indirect		
(Instr. 3)								Beneficially		Beneficial		
		(Month/Day/	Year)	(Instr. 8)				Owned Following	Direct (D) or Indirect	Ownership (Instr. 4)		
						(1)		Reported	(I)	()		
						(A) or		Transaction(s)	(Instr. 4)			
				Code V	Amount	(D)	Price	(Instr. 3 and 4)				
common	08/30/2017(1)			S	200	D	\$ 45.775	59,140	D			
stock												
common stock	08/31/2017 <u>(1)</u>			S	1,800	D	\$ 45.7778	57,340	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.

## Edgar Filing: KUMMER RAYMOND B - Form 4

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int of rlying	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 / Addro	ess	Relationships						
	Director	10% Owner	Officer	Other				
KUMMER RAYMOND B 2450 N ST NW WASHINGTON, DC 20037	,		CTO; VP Optical Transport					
Signatures								
Raymond B. Kummer	08/31/2017							

\*\*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) The sale of shares of common stock reported here was implemented pursuant to Dr. Kummer's structured sale plan (10b5-1 plan).

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.