## Edgar Filing: IPG PHOTONICS CORP - Form 4

IPG PHOTO	NICS CORP										
Form 4											
April 01, 201	5										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION										OMB APPROVAL	
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287		
Check this if no long subject to Section 16 Form 4 or Form 5 obligation may conti <i>See</i> Instru	F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Section 16(a) of the Securities Exchange Act of 1934, Public Utility Holding Company Act of 1935 or Section of the Investment Company Act of 1940					Expires:     January 31 2005       Estimated average burden hours per response     0.5					
1(b).											
(Print or Type R	esponses)										
			2. Issuer Name <b>and</b> Ticker or Trading Symbol IPG PHOTONICS CORP [IPGP]					5. Relationship of Reporting Person(s) to Issuer			
<i>a</i>		<b>A 6 1 11</b> \				[IFO	гj	(Chec	k all applicable	:)	
(Last) C/O IPG PH CORPORAT WEBSTER 1	TION, 50 OLD	(Middle)	3. Date of (Month/D 03/31/20	-	insaction			Director X Officer (give below) SVI		Owner er (specify	
	(Street)		1 If Ame	ndment Dat	e Original			6 Individual or Id	oint/Group Filir	or Check	
· · · · · · · · · · · · · · · · · · ·				ndment, Date Original nth/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check Applicable Line)</li> <li>_X_Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>			
OM ORD, N	111 01340							Person			
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	Securi	ties Acc	uired, Disposed of	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Yea	r) Execution any	med on Date, if Day/Year)	3. Transactic Code (Instr. 8) Code V	on(A) or Di (D) (Instr. 3,	spose	d of	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)	
Common Stock	03/31/2015			F	268	D	\$ 92.7	70,492	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)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Tit	le and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration D	Date	Amou	unt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day	/Year)	Unde	rlying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	rities	(Instr. 5)	Bene
	Derivative				Securities	3		(Instr	. 3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						-			or		
						Date	Expiration	Title	Number		
						Exercisable	Date		of		
				Code V	(A) (D)				Shares		
					,						
Repor	rtina O	wners									

## Edgar Filing: IPG PHOTONICS CORP - Form 4

## reporting

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Ovtchinnikov Alexander C/O IPG PHOTONICS CORPORATION 50 OLD WEBSTER ROAD OXFORD, MA 01540			SVP, Components				
Signatures							
/s/ Angelo P. Lopresti, Attorney-in-Fact	04/01/2	2015					
**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).

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.