## Edgar Filing: KUMMER RAYMOND B - Form 4

KUMMER F	RAYMOND I	В											
Form 4													
September 29	9, 2017												
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL				
	<b>UNITED STATES SECURITIES AND EXCHANGE COMMISSION</b> Washington, D.C. 20549							COMMISSION	OMB Number:	3235-0287			
Check thi								Expires:	January 31				
if no long subject to		FEMENT O	F CHAN	F CHANGES IN BENEFICIAL OWN					NERSHIP OF	Estimated	2005 average		
Section 1	Section 16.				SECURITIES						burden hours per		
Form 4 or Form 5			~ · ·			~ .				response	. 0.5		
obligation	20	•							ge Act of 1934,				
may cont	inue. Section		) of the In	•		•	- ·		of 1935 or Section	on			
See Instru 1(b).	uction	30(II)	) of the m	vestiller	in C	Joinpan	y Aci	. 01 19	/40				
(Print or Type R	Responses)												
1. Name and A KUMMER	2. Issuer Name <b>and</b> Ticker or Trading Symbol					g	5. Relationship of Reporting Person(s) to Issuer						
			COGENT COMMUNICATIONS HOLDINGS, INC. [CCOI](Check all applicable)						e)				
(Last)	(First)	(Middle)	3. Date of	Earliest	Tra	nsaction			Director		% Owner		
			(Month/Day/Year)						X_ Officer (give title Other (specify below) below)				
2450 N ST NW			09/29/20	09/29/2017						CTO; VP Optical Transport			
(Street)			4. If Ame	4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check				
			Filed(Mor						Applicable Line) _X_ Form filed by One Reporting Person				
WASHING	TON, DC 200	037								More than One R			
(City)	(State)	(Zip)	Tabl	e I - Non	-De	erivative S	Securi	ties Ac	quired, Disposed o	of, or Beneficia	lly Owned		
1.Title of	2. Transaction	emed 3. 4. Securities						5. Amount of	6. Ownership	7. Nature of			
Security	(Month/Day/Y					nAcquired				Form: Direct	Indirect		
(Instr. 3)		any (Month)	CodeDisposed of (D)/Day/Year)(Instr. 8)(Instr. 3, 4 and 5)						Beneficially Owned		Beneficial Ownership		
		× ·	, , , , , , , , , , , , , , , , , , ,	<sup>×</sup>	<i>.</i>	× ,		,	Following	(Instr. 4)	(Instr. 4)		
							(A)		Reported Transaction(s)				
				<b>a</b> .			or	D :	(Instr. 3 and 4)				
common				Code	V	Amount	(D)	Price	,				
common stock	09/29/2017	(1)		G		1,200	D	\$0	49,140	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 Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		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		

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## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
KUMMER RAYMOND B 2450 N ST NW WASHINGTON, DC 20037			CTO; VP Optical Transport	t				
Signatures								
/s/ Raymond B. Kummer	09/29/201	7						
**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) On September 29, 2017 Dr. Kummer made a bona fide gift in aggregate of 1,200 among each of his four (4) adult children.

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.