SEC Form 3 FORM 3

## UNITED STATES SECURITIES AND EXCHANGE

COMMISSION

Washington, D.C. 20549

## **INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF** SECURITIES

3235-OMB Number: 0104

Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

	Address of Rep ren Marie	orting Person <sup>*</sup>	2. Date of E Requiring S (Month/Day 05/06/202	tatement /Year)	3. Issuer Name and Ticker or Trading Symbol <u>COHU INC</u> [ COHU ]				
(Last) 12367 CRC (Street) POWAY (City)	(First) DSTHWAITE CA (State)	(Middle) E CIRCLE 92064 (Zip)			4. Relationship of Reporting Issuer (Check all applicable) X Director Officer (give title below)	Person(s) to 10% Owner Other (specify below)		<ul> <li>5. If Amendment, Date of Original Filed (Month/Day/Year)</li> <li>6. Individual or Joint/Group Filing (Check Applicable Line)</li> <li>X Form filed by One Reporting Person Form filed by More than One Reporting Person</li> </ul>	
Table I - Non-Derivative Securities Beneficially Owned									
1. Title of Security (Instr. 4)				I	2. Amount of Securities Beneficially Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)	
No securities are beneficially owned					0	D			
Table II - Derivative Securities Beneficially Owned           (e.g., puts, calls, warrants, options, convertible securities)									
1. Title of Derivative Security (Instr. 4) Expiration Date (Month/Day/Year)			ate	3. Title and Amount of So Underlying Derivative Se (Instr. 4)		4. Convers or Exerc	ise Form:	6. Nature of Indirect Beneficial Ownership (Instr.	
		Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Price of Derivativ Security	/e or Indirect	5)	

**Explanation of Responses:** 

05/08/2024

\*\* Signature of Reporting Person

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 5 (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.

### OMB APPROVAL

# /s/ Jeffrey D. Jones, by Power of Attorney

Date