Edgar Filing: CTS CORP - Form 4

CTS CORP

| Form 4 | | | | | | | | | | | | |
|---|---|---|---|--|------------------|------------------------------|----------------------|---|--|----------------|--|--|
| June 09, 2008 | | | | | | | | | | | | |
| FORM / | | | | | | | | | OMB APPROVAL | | | |
| Washington, D.C. 20549 | | | | | | | | OMMISSION | OMB Number: | 3235-0287 | | |
| Check this box if no longer | | | Expires: | January 31, 2005 | | | | | | | | |
| subject to Section 16. Form 4 or | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES | | | | | | | | Estimated a burden hou response | verage | | |
| Form 5 obligations may continue.Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 19401(b). | | | | | | | | | | | | |
| (Print or Type Respon | nses) | | | | | | | | | | | |
| | | | 2. Issuer Name and Ticker or Trading Symbol CTS CORP [CTS] | | | | | 5. Relationship of Reporting Person(s) to Issuer | | | | |
| (Least) | (Einst) | | | | | | | (Check all applicable) | | | | |
| (Mor | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/06/2008 | | | | | Director 10% Owner _X_Officer (give title Other (specify below) v.P. Gen. Counsel & Secretary | | | | |
| (| (Street) 4. If Amendment, Filed(Month/Day/Y | | | | y/Year) Applicab | | | | idual or Joint/Group Filing(Check le Line) n filed by One Reporting Person | | | |
| ELKHART, IN 46514 | | | | | | | | | fore than One Reporting | | | |
| (City) (| (Z | ip) | Table | e I - Non-D | erivative | Secur | ities Acq | uired, Disposed of | , or Beneficial | ly Owned | | |
| | | 2A. Deemed Execution Da any (Month/Day/Y | | 3. Transactio Code (Instr. 8) | (Instr. 3, | sposed 4 and (A) or | d of (D) 5) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | | |
| Common Stock 06/0 | 06/2008 | | | Code V F | Amount 687 | (D) D | Price \$ 10.82 | 61,521 | D | | | |
| Common Stock | | | | | | | | 853 <u>(1)</u> | I | 401(k) Plan | | |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 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. Transacti Code (Instr. 8) | 5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Amou Unde Secur | le and int of rlying ities . 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur 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 | | | | | | |
|---|---------------|-----------|-------------------------------|-------|--|--|--|
| reporting officer (unit) (rear off | Director | 10% Owner | Officer | Other | | | |
| CUTTER RICHARD G 905 WEST BLVD. NORTH ELKHART, IN 46514 | | | V.P. Gen. Counsel & Secretary | | | | |
| Signatures | | | | | | | |
| Richard G. Cutter, as | | | | | | | |

Attorney-in-fact 06/09

06/09/2008 Date

**Signature of Reporting Person

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) Reflects on-going acquisitions under 401(k) 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.