IVERSON KATHLEEN P

Form 4 May 17, 2005

FORM 4

OMB APPROVAL

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number: 3235-0287

Check this box if no longer subject to Section 16.

Number:

January 31,
2005

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per response... 0.5

Form 4 or Form 5 obligations may continue. See Instruction

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 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading IVERSON KATHLEEN P Issuer Symbol CYBEROPTICS CORP [CYBE] (Check all applicable) (First) (Middle) (Last) 3. Date of Earliest Transaction (Month/Day/Year) _X__ Director 10% Owner X_ Officer (give title Other (specify 5900 GOLDEN HILLS DRIVE 05/16/2005 below) President and CEO (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting GOLDEN VALLEY, MN 55416 Person

(City)	(State) (Z	Table Table	I - Non-De	rivative Securit	ties Acc	quired, Disposed o	of, or Beneficial	ly Owned
1.Title of Security	2. Transaction Date (Month/Day/Year)	Execution Date, if	TransactionAcquired (A) or		5. Amount of Securities Beneficially	6. Ownership Form: Direct	7. Nature of Indirect Beneficial	
(Instr. 3)		any (Month/Day/Year)	(Instr. 8)	Disposed of (D (Instr. 3, 4 and (A) or	′	Owned Following Reported Transaction(s) (Instr. 3 and 4)	(D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common Stock			Code V	Amount (D)	Price	11,060	D	
Common Stock						155	I	By minor children (1)

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

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SEC 1474

(9-02)

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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)	Code	5. Number of orDerivative Securities Acquired (A or Disposed (D) (Instr. 3, 4, and 5)	A)	6. Date Exercisal Expiration Date (Month/Day/Yea		7. Title and A Underlying S (Instr. 3 and	Securition
				Code V	(A) ((D)	Date Exercisable	Expiration Date	Title	Amou or Numb of Sha
Employee Stock Option (Right to Buy)	\$ 12.25						07/28/1999(2)	07/28/2003	Common Stock	13,5
Employee Stock Option (Right to Buy)	\$ 11.87						02/15/2003(2)	02/15/2012	Common Stock	50,0
Employee Stock Option (Right to Buy)	\$ 4.3						09/13/2003(2)	09/13/2009	Common Stock	31,5
Employee Stock Option (Right to Buy)	\$ 11.42	05/16/2005		M	30,000		05/16/2006(2)	05/16/2012	Common Stock	30,0

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
IVERSON KATHLEEN P 5900 GOLDEN HILLS DRIVE GOLDEN VALLEY, MN 55416	X		President and CEO				

Signatures

Reporting Person

Kathleen P.	05/16/2005		
Iverson			
**Signature of	Date		

Reporting Owners 2

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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) As custodian for minor child under the Uniform Transfers to Minors Act.
- (2) Exercisable with respect to 25% of such shares on such date and with respect to an additional cumulative 25% of such shares on the next three anniversaries of such date.

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.