FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-028							
Catimated average but	rdon							

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

37 Estimated average burden hours per response: 0.5

Name and Address of Reporting Person* Diabase Debags Income.					2. Issuer Name and Ticker or Trading Symbol CUTERA INC [CUTR]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
Richey Robert Jason				SOTERING [GOIN]									Direc	ctor	10%	Owner				
				- 2 5	D. Data of Fadinat Turnanting (Manth (Day))								\dashv	X	Office	er (give title v)	Other below	(specify		
(Last)	(Fi	rst) (Middle)			3. Date of Earliest Transaction (Month/Day/Year) 08/01/2018									(Chief Operating Officer				
C/O CUTERA, INC.			00/	00/01/2010								Ciner Operating Officer								
3240 BAYSHORE BLVD																				
3240 D11	I SHORE I)L\D			4 If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6	6. Individual or Joint/Group Filing (Check Applicable					
,						4. If Amendment, Date of Original Filed (Month/Day/Year) 08/09/2018									Line)					
(Street)					100/	03/2	010								X	Form	n filed by One	e Reporting Per	son	
BRISBA	NE CA	A 9	4005												21		•			
					.												orm filed by More than One Reporting erson			
(O:t-)	(6)	-+->	7 :>													. 0.0	011			
(City)	(5)	ate) (Zip)																	
		Tabl	e I - Nor	ı-Deriv	ative	Sec	curitie	s Acq	uired,	Dis	posed o	f, oı	r Bene	eficia	ally (Owne	ed			
1. Title of S	ecurity (Inst	r. 3)		2. Trans	action	ction 2A. Deemed 3. 4. Securities Acquired (A									ount of	6. Ownership	7. Nature			
		•		Date (Month)	Day/Vo	Execution Date,						d Of (I	Of (D) (Instr. 3, 4					Form: Direct (D) or Indirect	of Indirect Beneficial	
(Month/D			Dayrre	ay/Year) if any (Month/Day/Year)			Code (Instr. 5)				Benef Owne		d Following	(I) (Instr. 4)	Ownership					
						·	<u> </u>		'			Reported		```	(Instr. 4)					
								Code	v	Amount		(A) or Price		Transaction(s) (Instr. 3 and 4)						
COMMON STOCK 08/01.				1/2018				A		56,77	56,771 A		\$0	56,771		D				
00/01/						2010								το 35,771 D						
		Та	ble II - D) Derivat	ive S	ecu	rities	Acqui	ired, Di	spo	sed of,	or B	Benefi	ciall	y Ow	ned				
											onvertib									
1. Title of	2.	3. Transaction	3A. Deeme	ed	4.		5. Nu	mber	6. Date Ex	ercis	able and	7. Ti	itle and		8. Pri	ce of	9. Number o	f 10.	11. Nature	
Derivative	Conversion	Date (Month/Day/Year)	Execution	Date,			ion of		Expiration	Expiration Date			Amount of		Derivative Security (Instr. 5)		derivative	Ownership	of Indirect	
Security (Instr. 3)	or Exercise Price of		if any (Month/Day/		Code (8)	Instr.	Derivative (I		(Month/Day/Year)			Securities Underlying					Securities Beneficially	Form: Direct (D)	Beneficial Ownership	
(ay/rear) 0)		Acquired			Derivative				1		Owned	or Indirect	(Instr. 4)						
	Security			- 1		(A) or				Security (Ir				str. 3			Following	(I) (Instr. 4)		
				- 1								anu	and 4)		1		Reported Transaction	(s)		
				- 1				(Instr. 3, 4									(Instr. 4)	"[
				Ĺ	and 5)															
													Amo	ount						
									or Number		her									
									Date		Expiration		of	ibel			1			
				- 1	Code	۱v	(A)	(D)	Exercisat	le [Date	Title	: Sha	res						

Explanation of Responses:

1. The reporting person's original Form 4 inadvertently indicated a value of "\$42.609", rather than "0", for the granting of Restricted Stock Units (RSUs).

/s/ DARREN ALCH P.O.A.

01/22/2019

** Signature of Reporting Person

Date

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 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.

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.