SEC Form 4

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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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| | | |

| 1. Name and Addr SANTILLI | | Person* | 2. Issuer Name and Ticker or Trading Symbol <u>CUTERA INC</u> [CUTR] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner |
|------------------------------|--|----------|--|--|
| (l. cot) | (First) | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) | X Officer (give title Other (specify below) below) |
| · · · | .ast) (First) (Middle) //O CUTERA, INC. | | 11/22/2005 | CFO & VP of Finance and Admin. |
| 3240 BAYSHO | RE BLVD. | | | |
| r | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Individual or Joint/Group Filing (Check Applicable Line) |
| (Street) | СА | 94005 | | X Form filed by One Reporting Person |
| | CA | 94003 | | Form filed by More than One Reporting Person |
| (City) | (State) | (Zip) | | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | Transaction Dis Code (Instr. 5) | | | | | 5. Amount of Securities Beneficially Owned Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership |
|---------------------------------|--|---|------------------------------------|---|--------|---------------|--------------------|---|---|---|
| | | | Code | v | Amount | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | | (Instr. 4) |
| Common Stock | 11/22/2005 | 11/22/2005 | М | | 224 | A | \$5.5 | 9,435 | D | |
| Common Stock | 11/22/2005 | 11/22/2005 | S | | 224 | D | \$ <mark>39</mark> | 9,211 | D | |
| Common Stock | 11/22/2005 | 11/22/2005 | М | | 7,276 | A | \$5.5 | 16,487 | D | |
| Common Stock | 11/21/2005 | 11/22/2005 | S | | 7,276 | D | \$ <mark>39</mark> | 9,211 | D | |

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. Transa Code (8) | | of | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---|---|--|---|------------------------------|---|-----|-------|--|--------------------|--|--|---|--|--|--|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |
| Employee Stock Option (Right to Buy) | \$5.5 | 11/22/2005 | | М | | | 7,500 | 09/14/2002 ⁽¹⁾ | 09/24/2011 | Common Stock | 7,500 | \$0 | 60,000 | D | |

Explanation of Responses:

1. Options vest according to the following schedule: 1/4 upon the date exercisable, and 1/48 per month thereafter.

<u>/s/ Ronald J. Santilli</u>

** Signature of Reporting Person Date

11/23/2005

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

 \ast 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.