FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPRO | VAL |
|------------------------|---------------------------------------|
| OMB Number: | 3235-0287 |
| Estimated average burd | en |
| hours per response: | 0.5 |
| | OMB Number: Estimated average burd |

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

| 1. Name and Address of Reporting Person* <u>APFELBERG DAVID B</u> | | | | | 2. | Section So(i) of the investment company Act of 1940 Super Name and Ticker or Trading Symbol CUTERA INC [CUTR] | | | | | | | | | plicable ctor |) | ting Person(s) to Iss | | wner | |
|---|---|---|-------------|--|--------------|---|----------------------|---------------------|------------------|---|------|---|---|------------|--|--------------|--|--|------|--|
| (Last) (First) (Middle) C/O CUTERA, INC. 3240 BAYSHORE BLVD | | | | ile) | 02 | 3. Date of Earliest Transaction (Month/Day/Year) 02/22/2013 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Officer (give title Other (stellar) below) 6. Individual or Joint/Group Filing (Check Ap | | | | | |
| (Street) BRISBA | BRISBANE CA 94005 | | | 05 | | 4. If Amendment, Date of Original Filed (Month/Day/Year) 02/26/2013 | | | | | | | | | Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (=-9) | | | , | - Non-Deriv | /ativ | e Seci | urities | Acai | uired. | Dispos | ed o | of. or | Benefic | ially Own | ed | | | | | |
| 1. Title of Security (Instr. 3) | | | | 2. Transaction Date (Month/Day/Ye | 2 ear) if | 2A. Deemed Execution Date, | | 3. Trans Code | 4. Securities Ac | | | | 5. Amount of Securities Beneficially Owned Following | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. | | | |
| | | | | | | | | Code | v | Amount | | (A) or (D) | Price | Transactio | Reported Transaction(s) (Instr. 3 and 4) | | | 4) | | |
| COMMON | | | | 02/22/2013 | | 02/22/2013 | | S | | 10,000(1) | | D | \$ 12.55 ⁽² | 32,619 | | I . | | By Self as Trustee for DAVID B. APFELBERG & SUSAN M. APFELBERG TTEES DAVID APFELBERG AND SUSAN M APF | | |
| COMMON 02/22/2013 | | | | | 3 | 02/22/2013 | | S | | 6,211 | | D | \$12.55 ⁽² | 26,4 | ,408 | |) | | | |
| | | ٦ | able | ll - Deriva (e.g., p | | | | | | | | | eneficial ecurities | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Year) (Month/Day/Year) 3. Deemed Execution Date, if any (Month/Day/Year) | | 4. Trans | ransaction of Derivating Acquire (A) or Dispose of (D) (Instr. 3, and 5) | | hber 6 E (I tive tites red 3, 4 | . Date E xpiratio | Expiration | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) Amount or Number of Shares | | 8. Price of Derivative Security (Instr. 5) | Derivative deriva Security Secur | | 10. Owner Form: Direct or Indi (I) (Ins | (D) irect | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |

Explanation of Responses:

1. Stock was sold by David B. Apfelberg as trustee of the "DAVID B. APFELBERG & SUSAN M. APFELBERG TTEES DAVID APFELBERG AND SUSAN M APFELBERG LIVING TRUST U/A DTD 1-15-87".

2. Stock was sold in multiple transactions at prices ranging from \$12.44 to \$12.71 with \$12.55 being the average.

Remarks:

/s/ David B. Apfelberg

02/26/2013

** 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.