

CIBER INC
Form 4
October 28, 2016

FORM 4

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

OMB APPROVAL

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type Responses)

1. Name and Address of Reporting Person *
BOUSTRIDGE MICHAEL

(Last) (First) (Middle)

**6363 SOUTH FIDDLER'S GREEN
CIRCLE, SUITE 1400**

(Street)

**GREENWOOD
VILLAGE, CO 80111**

(City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol
CIBER INC [CBR]

3. Date of Earliest Transaction
(Month/Day/Year)
10/26/2016

4. If Amendment, Date Original Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

Director 10% Owner
 Officer (give title below) Other (specify below)
President & CEO

6. Individual or Joint/Group Filing(Check Applicable Line)
 Form filed by One Reporting Person
 Form filed by More than One Reporting Person

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) | 3. Transaction Code (Instr. 8) | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 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) | 7. Nature of Ownership (Instr. 4) | |
|---------------------------------|--------------------------------------|--|--------------------------------|---|---|--|-----------------------------------|-------|
| | | | | Code | V | Amount | (A) or (D) | Price |
| Common Stock, \$.01 par value | 10/26/2016 | | M ⁽¹⁾ | 45,873 | A | \$ 0 | 648,270 | D |
| Common Stock, \$.01 par value | 10/26/2016 | | F ⁽²⁾ | 19,243 | D | \$ 0.99 | 629,027 | D |

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

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number.

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. Transaction Code (Instr. 8) | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | 6. Date Exercisable and Expiration Date (Month/Day/Year) | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | Amount or Number of Shares |
|--|--|--------------------------------------|--|--------------------------------|---|--|---|----------------------------|
| Restricted Stock Unit | (3) | 10/26/2016 | | M | 45,873 | 10/26/2016 ⁽⁴⁾ ⁽⁵⁾ | Common Stock, \$0.01 par value | 45,873 |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | |
|--|---------------|-----------|-----------------|-------|
| | Director | 10% Owner | Officer | Other |
| BOUSTRIDGE MICHAEL 6363 SOUTH FIDDLER'S GREEN CIRCLE SUITE 1400 GREENWOOD VILLAGE, CO 80111 | X | | President & CEO | |

Signatures

Michael
Boustridge 10/28/2016

**Signature of Reporting Person Date

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) Represents shares acquired upon release of restricted stock units.
- (2) Represents shares withheld from the released restricted stock units for the payment of applicable income and payroll withholding taxes due on release.
- (3) Each Restricted Stock Unit represents a contingent right to receive one share of CIBER, Inc. common stock.
- (4) These RSUs vest quarterly beginning six months from the date of grant for a period of three years.
- (5) RSU converts to common stock over 3 year life (per vesting schedule)

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.