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| CIBER INC | | | | | | | | | | | |
|---|--|---------------|---------------------------------|---|------------|--------|--------------|---|--|---|--|
| Form 4 | | | | | | | | | | | |
| February 02, | , 2007 | | | | | | | | | | |
| FORM | 14 | | | | | | | | OMB AF | PROVAL | |
| Washington, D.C. 20549 | | | | | | | OMMISSION | OMB Number: | 3235-0287 | | |
| Check th if no long | | | | | | | | | Expires: | January 31, 2005 | |
| subject to Section 16. Form 4 or | | | | CHANGES IN BENEFICIAL OWN SECURITIES | | | | | P OF Estimated average burden hours per response | | |
| Form 5 obligatio may cont <i>See</i> Instru 1(b). | ns Section 17 | 7(a) of the 3 | Public U | | ding Con | ipany | Act of | Act of 1934, 1935 or Section) | I | | |
| (Print or Type I | Responses) | | | | | | | | | | |
| STEVENSON BOBBY G Symb | | | Symbol | issuer raine and frener of frading | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| (Last) (First) (Middle) | | | 3. Date of Earliest Transaction | | | | | (Check all applicable) | | | |
| (Month/ | | | | Day/Year) 2007 | | | | XDirectorX10% Owner Officer (give titleOther (specify below) below) | | | |
| Filed(1 GREENWOOD | | | | Ionth/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person | | | |
| VILLAGE, | 0 80111 | | | | | | | | | | |
| (City) | (State) | (Zip) | Tab | le I - Non-E | Derivative | Securi | ities Acqu | ired, Disposed of, | or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | Security (Month/Day/Year) Execution Date, if | | | 3. 4. Securities Acquired (A Transactiom Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or Code V Amount (D) Price | | | | 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 Indirect Beneficial Ownership (Instr. 4) | |
| Common Stock, \$.01 par value Common | 02/01/2007 | | | S <u>(1)</u> | 12,500 | | \$ 6.8689 | 6,367,806 | D | | |
| Stock, \$.01 par value | | | | | | | | 117,570 | Ι | By 401K | |

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)

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required to respond unless the form displays a currently valid OMB control 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) | 4. Transacti Code (Instr. 8) | 5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | Expiration Date (Month/Day/Year) | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr |
|---|---|---|---------------------------------------|---|-------------------------------------|--------------------|---|--|---|--|
| | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|--|---------------|-----------|---------|-------|--|--|--|
| | Director | 10% Owner | Officer | Other | | | |
| STEVENSON BOBBY G | V | V | | | | | |
| 5251 DTC PKWY, SUITE 1400 GREENWOOD VILLAGE, CO 80111 | Х | Х | | | | | |
| Signatures | | | | | | | |

Bobby G. Stevenson <u>**Signature of</u> 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) Planned sale pursuant to 10b5-1 plan adopted by the reporting person on April 28, 2006 and amended effective December 21, 2006.

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.