Edgar Filing: MCGILL ARCHIBALD J - Form 4

MCGILL AR	CHIBALD J											
Form 4												
December 06	, 2011											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION							-	OMB APPROVAL				
							ONID	3235-0287				
Check this	s box		Was	hington,	ngton, D.C. 20549			Number:	January 31,			
if no longer								MEDSHID OF	Expires:	2005		
subject to		ENI OF CI		GES IN BENEFICIAL OW SECURITIES				NEKSHIP OF	Estimated average			
Section 16 Form 4 or				SECURI	IIIES					burden hours per response 0.5		
Form 5		uant to Secti	ion 16	(a) of the	Securiti	es Ex	chang	ge Act of 1934,	response	0.5		
obligation	18 Section 17(a)						-	f 1935 or Sectio	n			
may conti <i>See</i> Instru	nue.	30(h) of th		•	•	• •						
1(b).	enon											
(Print or Type R	esponses)											
		. *						5 D I .: I: (
	ddress of Reporting P			Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer				
MCGILL ARCHIBALD J Symbol												
		Cli	BEK I	R INC [CBR]				(Check all applicable)				
(Last)	(First) (M	,	3. Date of Earliest Transaction									
				ay/Year)				X_ Director 10% Owner Officer (give title Other (specify				
CIRCLE, SU	H FIDDLER'S GI	KEEN 12/	/03/20	11				below)	below)	er (speeny		
CIRCLE, SC												
				endment, Date Original				6. Individual or Joint/Group Filing(Check				
Filed(Mo				onth/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person				
GREENWO	OD							Form filed by M				
VILLAGE, O								Person				
(City)		Zip)										
(City)	(State) (Σ ι μ)	Table	I - Non-De	erivative S	ecuri	ties Aco	quired, Disposed of	f, or Beneficial	lly Owned		
1.Title of	2. Transaction Date			3. 4. Securities				5. Amount of	6. Ownership			
Security (Instr. 3)	(Month/Day/Year)		xecution Date, if		TransactionAcquired (A) or Code Disposed of (D)				Form: Direct (D) or	Indirect Beneficial		
(1130.5)		any (Month/Day/Year)					Owned	ndirect (I)	Ownership (Instr. 4)			
		`` `				Following	(Instr. 4)					
		(A)			Reported							
						or		Transaction(s) (Instr. 3 and 4)				
C				Code V	Amount	(D)	Price	(
Common	12/02/2011			M (1)	2 670	٨	¢ 0	41 150	D			
Stock, \$.01 par value	12/03/2011			M <u>(1)</u>	2,679	А	\$0	41,150	D			
pai value												

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

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 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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	Transaction of Derivative Code Securities		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Restricted Stock Unit	<u>(2)</u>	12/03/2011		М		2,679	12/03/2011 <u>(3)</u>	(4)	Common Stock, \$.01 par value	2,679

Edgar Filing: MCGILL ARCHIBALD J - Form 4

Reporting Owners

Reporting Owner Nan	Relationships					
				Officer	Other	
MCGILL ARCHIBALD J 6363 SOUTH FIDDLER'S SUITE 1400 GREENWOOD VILLAGE	Х					
Signatures						
Archibald J. McGill	12/06/2011					
**Signature of	Date					

Reporting Person

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) Each Restricted Stock Unit represents a contingent right to receive one share of CIBER, Inc. common stock.
- (3) The Restricted Stock Units vest in equal quarterly installments over a period of one year.
- (4) RSU converts to common stock over 1 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.