Edgar Filing: SCHERBARTH KATHRYN E - Form 4

| Form 4 | RTH KATHRYN | 1 E | | | | | | | | |
|---|--------------------------------------|-----------------------------|---|----------------------------|---------------------------------------|----------------|----------------------|--|------------------------------|---|
| February 09 | ЛЛ | отате: | SECUE | TTIES A | ND EV | | NCEO | OMMISSION | - | PPROVAL |
| | UNITED | SIAIE | | shington, | | | INGE C | OMIMISSION | OMB Number: | 3235-0287 |
| Check th if no long subject to Section 1 Form 4 c | ger o STATE 16. or | MENT O | Expires: January 3 200 Estimated average burden hours per response 0. | | | | | | | |
| Form 5 obligatio may cont <i>See</i> Instr 1(b). | tinue. Section 17 | (a) of the | Public Ut | | ling Con | npang | y Act of | e Act of 1934, 1935 or Section 0 | 1 | |
| (Print or Type l | Responses) | | | | | | | | | |
| | Address of Reporting | - | Symbol | • Name and TEC SEC | | | - | 5. Relationship of Issuer (Checl | Reporting Pers | |
| | C SECURITY TION, 3333 WE | (Middle) EST | | • | ansaction | | | Director X Officer (give below) VP-Milw | | |
| | (Street) E, WI 53209 | | | ndment, Da th/Day/Year) | - | 1 | | 6. Individual or Jo Applicable Line) _X_ Form filed by C Form filed by M Person | one Reporting Pe | rson |
| (City) | (State) | (Zip) | Tabl | e I - Non-D | erivative | Secur | ities Acq | uired, Disposed of | , or Beneficial | ly Owned |
| 1.Title of Security (Instr. 3) | 2. Transaction Da (Month/Day/Year | Transaction Date 2A. Deemed | | | 4. Securi n(A) or Di (Instr. 3, | spose | d of (D) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) | (D) or Be Indirect (I) Or | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| Common Stock, par value \$.01 per share | 02/07/2005 | | | Code V M | Amount 1,900 | or (D) A | Price \$ 16.63 | (Instr. 3 and 4) 1,900 | D | |
| Common Stock, par value \$.01 per share | 02/07/2005 | | | М | 1,000 | A | \$ 43.07 | 2,900 | D | |
| Common Stock, par | 02/07/2005 | | | S | 2,900 | D | \$ 58.5 | 0 | D | |

| value \$.01 per share | | | | | | | |
|--|------------|---|---------|---|-------------|-------|---|
| Common Stock, par value \$.01 per share | 02/09/2005 | М | 1,390 A | A | \$ 43.07 | 1,390 | D |
| Common Stock, par value \$.01 per share | 02/09/2005 | S | 1,390 I | D | \$ 57.21 | 0 | D |

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. 5. Number Transaction Derivative Code Securities (Instr. 8) 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) | | 8 1 2 () | |
|---|---|---|---|---|-----|--|---------------------|---|-----------------|--|--|
| | | | | Code V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | |
| Common Stock Option | \$ 16.63 | 02/07/2005 | | М | | 1,900 | 02/19/1996 | 02/19/2006 | Common Stock | 1,900 | |
| Common Stock Option | \$ 43.07 | 02/07/2005 | | М | | 1,000 | 08/29/2003 | 08/29/2005 | Common Stock | 1,000 | |
| Common Stock Option | \$ 43.07 | 02/09/2005 | | М | | 1,390 | 08/29/2003 | 08/29/2005 | Common Stock | 1,390 | |

Reporting Owners

| Reporting Owner Name / Address | porting Owner Name / Address | | | | | |
|---------------------------------------|------------------------------|-----------|---------|-------|--|--|
| | Director | 10% Owner | Officer | Other | | |

SCHERBARTH KATHRYN E STRATTEC SECURITY CORPORATION 3333 WEST GOOD HOPE ROAD GLENDALE, WI 53209

VP-Milwaukee Operations

Signatures

James M. Bedore, Attorney-in-fact

02/09/2005 Date

<u>**</u>Signature of 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).

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.