INTEST CORP Form 5 February 11, 2005

FORM 5

OMB APPROVAL

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

OMB 3235-0362 Number:

no longer subject to Section 16. Form 4 or Form 5 obligations

may continue.

Check this box if

January 31, Expires: 2005

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per response... 1.0

See Instruction Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, 1(b). Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section Reported

30(h) of the Investment Company Act of 1940 Form 4

Transactions Reported

1. Name and Address of Reporting Person ** GRAHAM DANIEL J			2. Issuer Name and Ticker or Trading Symbol	5. Relationship of Reporting Person(s) to Issuer			
			INTEST CORP [INTT]	(Check all applicable)			
(Last)	(First)	(Middle)	3. Statement for Issuer's Fiscal Year Ended	(carrie approximate)			
			(Month/Day/Year)	_X_ Director 10% Owner			
			12/31/2004	_X_ Officer (give title Other (specify			
C/O INTEST	ΓCORP, 7			below) below)			
ESTERBRO	OK LANE			GM-M & D Product Segment			

(Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Reporting

Filed(Month/Day/Year)

(check applicable line)

CHERRY HILL, Â NJÂ 08003

(State)

(Zip)

(City)

X Form Filed by One Reporting Person Form Filed by More than One Reporting

(City)	(State) ((Zip) Tabl	e I - Non-Deri	ivative Sec	urities Ac	quired, Disposed o	of, or Beneficial	ly 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)		ies Acquir sposed of 4 and 5) (A) or (D) Pr.	Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	12/20/2004	Â	G	6,000	D \$	<u>1)</u> 217,260	D	Â
Common Stock	12/20/2004	Â	G(2)	20,000	D \$	<u>1)</u> 197,260	D	Â
Common Stock	12/20/2004	Â	G(2)	20,000	A \$ 9	1) 129,000	I (3)	By Spouse

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 **SEC 2270** (9-02)

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of

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date		4.	5.	6. Date Exerc		7. Title		8. Price of	
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	Number	Expiration D	ate	Amoun		Derivative	
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underly	ing	Security	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securiti	es	(Instr. 5)	
	Derivative				Securities			(Instr. 3	and 4)		
	Security				Acquired						
	,				(A) or						
					Disposed						
					of (D)						
					(Instr. 3,						
					4, and 5)						
					4, and 3)						
								A	Amount		
						Data	Evaluation	O	r		
						Date	Expiration	Title N	Number		
						Exercisable	Date	О	of		
					(A) (D)			S	hares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
GRAHAM DANIEL J C/O INTEST CORP 7 ESTERBROOK LANE CHERRY HILL, NJ 08003	ÂX	Â	GM-M & D Product Segment	Â			

Signatures

/s/ Daniel J.
Graham

**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) Shares gifted; no sale occurred.
- (2) Gift to family member who shares reporting person's household.
- (3) The reporting person disclaims beneficial ownership of these securities, and this report shall not be deemed to be an admission that the reporting person is the beneficial owner of such securities for purposes of Section 16 or for any other purpose.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.

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