OPNET TECHNOLOGIES INC

Form 4

February 10, 2010

FORM 4

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

OMB Number:

3235-0287 January 31,

2005

0.5

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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OMB APPROVAL

Form 4 or Form 5 obligations may continue.

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

1(b).

(Print or Type Responses)

See Instruction

1. Name and Address of Reporting Person * 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading COHEN MARC A Issuer Symbol OPNET TECHNOLOGIES INC (Check all applicable) [OPNT] (Last) (First) (Middle) 3. Date of Earliest Transaction _X__ Director X__ 10% Owner X_ Officer (give title __Other (specify (Month/Day/Year) below) 7255 WOODMONT AVE 02/08/2010 Chairman, CEO, Treas, and Sec (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting BETHESDA, MD 20814 Person (City) (State) (7:m)

| (City) | (State) | Table Table | e I - Non-D | erivative | Secur | ities Acq | uired, Disposed o | f, or Beneficiall | ly Owned |
|---------------------|---------------------|------------------------|--------------------|------------|-----------|-------------|----------------------------|---------------------------|-----------------------|
| 1.Title of | 2. Transaction Date | | 3. | 4. Securi | | | 5. Amount of | 6. Ownership Form: Direct | 7. Nature of Indirect |
| Security (Instr. 3) | (Month/Day/Year) | Execution Date, if any | Transactio Code | (Instr. 3, | | ` ′ | Securities Beneficially | (D) or | Beneficial |
| | | (Month/Day/Year) | (Instr. 8) | | | | Owned | Indirect (I) | Ownership |
| | | | | | | | Following Reported | (Instr. 4) | (Instr. 4) |
| | | | | | (A) | | Transaction(s) | | |
| | | | Code V | Amount | or (D) | Price | (Instr. 3 and 4) | | |
| Common Stock | 02/08/2010 | | S | 975 | D | \$ 13.61 | 2,667,249 | D | |

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

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SEC 1474

(9-02)

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

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| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transacti Code (Instr. 8) | | | ate | 7. Title Amoun Under | int of lying ities | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene |
|---|---|---|---|---------------------------------------|-----------------------------------|---------------------|-----------------|----------------------------|--------------------------|--|---------------------------------|
| | Derivative Security | | | | Securities Acquired | | | (Instr. | 3 and 4) | | Owne Follo |
| | | | | | (A) or Disposed | | | | | | Repo Trans |
| | | | | | of (D) (Instr. 3, 4, and 5) | | | | | | (Instr |
| | | | | | 4, and 3) | | | | Amount | | |
| | | | | | | Date Exercisable | Expiration Date | Title | or Number of | | |
| | | | | Code V | (A) (D) | | | | Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|---|---------------|-----------|-------------------------------|-------|--|--|--|
| | Director | 10% Owner | Officer | Other | | | |
| COHEN MARC A 7255 WOODMONT AVE BETHESDA, MD 20814 | X | X | Chairman, CEO, Treas, and Sec | | | | |

Signatures

Marc A. Cohen 02/10/2010

**Signature of 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).

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.

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