FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | |
| Estimated average burden | | | | | | | | |
| hours per response: | 0.5 | | | | | | | |

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| | | | | | 1 | | (.,, | | ivesimen | | .,, | | | _ | | | | | | | |
|---|-------|--|---|---|-------------------------------|---|--|---|------------------------------------|---|--------------------|---|----------------|-----------------------|---|--|---|--|---|--|--|
| Name and Address of Reporting Person* DOAR MICHAEL | | | | | | 2. Issuer Name and Ticker or Trading Symbol HURCO COMPANIES INC [HURC] | | | | | | | | | | Relationship of Reporting Person(s) to Issuer (Check all applicable) (Check all applicable) | | | | | |
| (Last) | (Fir: | st) (M | | 3. Date of Earliest Transaction (Month/Day/Year) 10/04/2004 | | | | | | | | | | Offic below | er (give title w) | | Owner r (specify v) | | | | |
| ONE TEC | | | | | | | | | | | | | | | | | | | | | |
| (Street) | | 4. If A | If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) | | | | | | | | | |
| INDIANAPOLIS IN 46268 | | | | | | | | | | | | | | | X Form filed by One Reporting Person | | | | | | |
| (City) (State) (Zip) | | | | | | | | | | | | | | | | Form filed by More than One Reporting Person | | | | | |
| | | Tabl | e I - N | Non-Deriv | ative | Secu | ırities | Acc | quired, | Dis | posed of | f, or | Ben | efici | ally | Own | ed | | | | |
| | | | | 2. Transact Date (Month/Day | | Execut Year) if any | | Deemed ution Date, y uth/Day/Year) | | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (Disposed Of (D) (Instr. 3 and 5) | | | 3, 4 Secur Benef Owne | | icially d | 6. Ownership Form: Direct (D) or Indirect (I) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | Code | v | Amount | | A) or D) | Price | | Following Reported Transaction(s) (Instr. 3 and 4) | | (Instr. 4) | (Instr. 4) | | | |
| Common Stock | | | | 10/04/2 | 2004 10 | | 0/04/2004 | | S | | 2,648 | | D | \$15 | | 19,352 | | D | | | |
| Common Stock | | | | 10/04/2 | 2004 10 | | 10/04/2004 | | S | | 1,152 | | D | \$15.02 | | 18,200 | | D | | | |
| Common Stock 10/04/ | | | | | 004 10/04/2004 | |)4 | S | | 100 | | D | \$15.03 | | 3 18,100 | | D | | | | |
| Common Stock 10/04 | | | | | 004 10/04/2004 | |)4 | S | Г | 1,100 | | D | \$15.04 | | 17,000 | | D | | | | |
| | | Та | ble II | - Derivat (e.g., pı | | | | | | | sed of, onvertib | | | | | wned | | | | | |
| 1. Title of Derivative Security (Instr. 3) | | 3. Transaction Date (Month/Day/Year) | Execu if any | eemed tion Date, h/Day/Year) | 4. Transa Code (I 8) | | tr. Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date E Expiratio (Month/D | n Da | | 7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4) | | 3 | of Der Sec (Ins | erivative ecurity estr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. | Beneficial Ownership | | |
| | | | | | Code | v | | | Date Exercisa | | Expiration Date | Title | or Nu of | nount mber ares | er | | | | | | |

Explanation of Responses:

Remarks:

/s/ Michael Doar

10/04/2004

** Signature of Reporting Person

Date

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

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.

^{*} 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).