Edgar Filing: WIND RIVER SYSTEMS INC - Form 4

| WIND RIVE Form 4 June 13, 2000 FORM Check thi if no long subject to Section 10 Form 4 on Form 5 obligation may conti <i>See</i> Instru 1(b). | 14 UNITED is box ger 6. r Filed pu Section 17 | STATES S MENT OF rsuant to Se (a) of the Pu | Washingt CHANGES SEC ection 16(a) o | on, D.C. 20 IN BENEF URITIES f the Securit Holding Cor | ICIA ties E | LOWN Exchange y Act of | OMMISSION NERSHIP OF e Act of 1934, 1935 or Section 0 | OMB Number: Expires: Estimated burden ho response. | ours per | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------|-----------------------------------------------------------------------------------------------|--------------------------------------------------------------------|-----------------------|------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|-------------------------------------------------------------------|--|
| 1. Name and Address of Reporting Person <u>*</u> ELMORE WILLIAM B | | | 2. Issuer Name and Ticker or Trading Symbol WIND RIVER SYSTEMS INC [WIND] | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| (Last) (First) (Middle) C/O WIND RIVER SYSTEMS, INC., 500 WIND RIVER WAY | | | 3. Date of Earliest Transaction(Month/Day/Year)06/12/2006 | | | X_ Director 10% Owner Officer (give title Other (specify below) below) | | | | |
| | | | _ | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person | | | |
| (City) | (State) | (Zip) | Table I - No | on-Derivative | Secur | ities Acqu | ired, Disposed of | , or Benefici | ally Owned | |
| | 2. Transaction Date Month/Day/Year) | | 3. ate, if Transac Code | 4. Securitie tiotor Disposed (Instr. 3, 4) | s Acq d of (I | uired (A) D) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| Common Stock |)6/12/2006 | | Р | 100,000 | A | \$ 9.0721 | 1,214,907 | D | | |
| Common Stock |)6/12/2006 | | Р | 50,000 | А | \$ 9.0591 | 1,264,907 | D | | |
| Common Stock | | | | | | | 290,000 | Ι | By partnerships | |

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

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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) | 4. Transactic Code (Instr. 8) | 5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | 7. Titl Amou Under Secur (Instr. | int of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr |
|-----------------------------------------------------|-----------------------------------------------------------------------|-----------------------------------------|----------------------------------------|-------------------------------------------------------------------------------------------------------------------------|---------------------|--------------------|----------------------------------------------|----------------------------------------|-----------------------------------------------------|----------------------------------------------------------------------------|
| | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | | |
|---------------------------------------------------------------------------------------------|---------------|-----------|---------|-------|--|--|--|--|
| Terformig Conner Found (Francos | Director | 10% Owner | Officer | Other | | | | |
| ELMORE WILLIAM B C/O WIND RIVER SYSTEMS, INC. 500 WIND RIVER WAY ALAMEDA, CA 94501 | Х | | | | | | | |
| Signatures | | | | | | | | |
| /s/ Michael W. Zellner, by Power of Attorney | | 06/13/20 | 06 | | | | | |
| <u>**</u> Signature of Reporting Person | | Date | | | | | | |
| Explanation of Responses: | | | | | | | | |
| If the form is filed by more than one reporting person, <i>see</i> 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.