**ALTIRIS INC** Form 4 March 07, 2006

## FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

30(h) of the Investment Company Act of 1940

**OMB APPROVAL** 

**OMB** 3235-0287 Number:

January 31, Expires: 2005

Estimated average burden hours per response... 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5

**SECURITIES** Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue.

(Print or Type Responses)

See Instruction

1(b).

1. Name and Address of Reporting Person <u>*</u> ERICKSON STEPHEN C		2. Issuer Name <b>and</b> Ticker or Trading Symbol ALTIRIS INC [ATRS]	5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)		
(Last) (First)	(Middle)	3. Date of Earliest Transaction	(Check an approach)		
ALTIRIS, INC., 588 W SOUTH	TEST 400	(Month/Day/Year) 03/03/2006	Director 10% Owner _X_ Officer (give title Other (specify below)  VP and Chief Financial Officer		
(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person		
LINDON, UT 84042			Form filed by More than One Reporting Person		
(City) (State)	(Zip)	Table I - Non-Derivative Securities A	cquired, Disposed of, or Beneficially Owned		

(City)	(State) (Zi	Table I	- Non-Der	ivative Se	curiti	es Acqu	nired, Disposed of	, or Beneficial	y Owned
1.Title of Security	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if	3. Transactio	4. Securi		nr.	5. Amount of Securities	6. Ownership Form: Direct	7. Nature of Indirect
(Instr. 3)	(Monar Bay) Tear)	any	Code	Disposed	of (D	))	Beneficially	(D) or	Beneficial
		(Month/Day/Year)	(Instr. 8)	(Instr. 3,	4 and	5)	Owned Following	Indirect (I) (Instr. 4)	Ownership (Instr. 4)
					(A) or		Reported Transaction(s)	(mour i)	(Instr. 1)
			Code V	Amount	(D)	Price	(Instr. 3 and 4)		
Common Stock	02/24/2006		D	826	D	<u>(1)</u>	28,412	D	
Common Stock	03/03/2006	03/03/2006(2)	M	5,000	A	\$ 7.5	33,412	D	
Commmon Stock	03/03/2006	03/03/2006(2)	S	5,000	D	\$ 21	28,412	D	

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control

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#### 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. Transactio Code (Instr. 8)	5. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4,	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Option to buy Common Stock	\$ 7.5	03/03/2006	03/03/2006(2)	M	5,000	02/22/2003(3)	02/22/2012	Common Stock	5,000

## **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

ERICKSON STEPHEN C ALTIRIS, INC. 588 WEST 400 SOUTH LINDON, UT 84042

VP and Chief Financial Officer

## **Signatures**

/s/ Stephen C. 03/07/2006 Erickson

\*\*Signature of Reporting Date

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).
- (1) Not applicable.
- (2) Transaction pursuant to Reporting Person's 10b5-1 trading plan.
- (3) The option vests as to 1/4 of the shares subject to the option on the first anniversary of the Date Exercisable and 1/48 each month thereafter.

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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