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ADOBE SYS	STEMS INC												
Form 4													
May 02, 2000	6												
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB APPROVAL				
	UNITED) STATES				ND EX(D.C. 20:		NGE (COMMISSION	OMB Number:	3235-0287		
Check thi if no long	or		Expires:	January 31,									
subject to	SIA IH	MENT O	F CHAN			Estimated average 2005							
Section 1	6.			SECURITIES						burden hours per			
Form 4 or Form 5			Castian 14	(a) af	41a a	Conniti	as Es	1	A at af 1024	response 0.5			
obligation									e Act of 1934, f 1935 or Section	n			
may conti	inue.		of the Inv	•		•	- ·			11			
<i>See</i> Instru 1(b).	iction	50(11)		, courie		compun	, 1100						
(Print or Type R	Responses)												
1. Name and Address of Reporting Person <u>*</u> ELOP STEPHEN A			2. Issuer Symbol	Name a	nd '	Ticker or '	Fradin	g	5. Relationship of Reporting Person(s) to Issuer				
•				E SYST	EN	AS INC	[ADE	3E]	(Check all applicable)				
(Last)	(First)	(Middle)	3. Date of Earliest Transaction					(Check an appreable)					
(Month/Da				-					Director 10% Owner X Officer (give title Other (specify				
ADOBE SY		DV	04/24/20)06					below)	below)	er (specify		
AVENUE	ATED, 345 PA	IKK							Preside	nt WW Field C	ps		
	(Street)		4. If Ame	ndment,	Dat	e Original			6. Individual or Jo	oint/Group Filir	1g(Check		
Filed(Mont				th/Day/Y	ear)				Applicable Line)				
SAN JOSE,	CA 95110								_X_ Form filed by 0 Form filed by M Person				
(City)	(State)	(Zip)	Table	e I - Nor	1-De	erivative S	Securi	ties Acc	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of	2. Transaction Da	ate 2A. Dee	emed	3.		4. Securi	ties Ac	cquired	5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Yea	1	on Date, if	Transaction(A) or Disposed of					Securities	Form: Direct			
(Instr. 3)		any (Month/	'Day/Year)	Code (D) (Instr. 8) (Instr. 3, 4 and 5)			5)	Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership			
		× ·		,	<i>,</i>	× ,			Following	(Instr. 4)	(Instr. 4)		
							(A)		Reported Transaction(s)				
				Cal	17	A	or	D'	(Instr. 3 and 4)				
Common					V	Amount	(D)	Price \$					
Stock	04/24/2006			F		1,315	D	ф 37.2	158,064 <u>(1)</u>	D			

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 the form 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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (Instr. 8	Securi Acqui	oer ative ities red	Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owno Follo
					(A) or Disposion of (D)	sed						Repo Trans (Instr
					(Instr. 4, and					Amount		
				Cala	V (A) (Date Exercisable	Expiration Date	Title	of		
Dener	din a O			Code	V (A) ((D)				Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships							
FB	Director	10% Owner	Officer	Other				
ELOP STEPHEN A ADOBE SYSTEMS INCORPORATED 345 PARK AVENUE SAN JOSE, CA 95110			President WW Field Ops					
Signatures								

/s/ Stuart Fagin, as attorney-in-fact

05/02/2006

**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) Currently includes 94,875 shares of restricted stock, which vests at a rate of 2,875 shares per month.

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.