ALTIRIS INC Form 4 December 04, 2006

FORM 4

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

OMB APPROVAL

OMB Number: 3235-0287

Expires: January 31, 2005
Estimated average

Estimated average burden hours per response... 0.5

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Form 5 obligations may continue. See Instruction

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).

Common

Stock

11/30/2006

(Print or Type Responses)

1. Name and Address of Reporting Person * ERICKSON STEPHEN C			2. Issuer Name and Ticker or Trading Symbol ALTIRIS INC [ATRS]					ng	5. Relationship of Reporting Person(s) to Issuer			
(Last) C/O ALTIR SOUTH	(First) (M	Middle) EST 400	3. Date of Earliest Transaction (Month/Day/Year) 11/30/2006						(Check all applicable) Director 10% OwnerX Officer (give title Other (specify below) VP and CFO			
I INDON I	(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 Form filed by More than One Reporting			
LINDON, U							Person					
1.Title of Security (Instr. 3)	(State) 2. Transaction Date (Month/Day/Year)	Executio any		3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or Code V Amount (D) Price			cquired d of (D) 5)	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		
Common Stock	11/30/2006	11/30/2	2006 <u>(1)</u>	M		3,945	A	\$ 7.5	47,924	D		
Common Stock	11/30/2006	11/30/2	2006(1)	M		5,000	A	\$ 13.08	52,924	D		

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

S

8,945 D

\$ 25

11/30/2006(1)

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

43,979

D

Edgar Filing: ALTIRIS INC - Form 4

number.

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

1. Tit Deriv Secur (Instr	ative rity	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number out of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	(Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
					Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Option buy communications		\$ 7.5	11/30/2006	11/30/2006(1)	M	3,945	02/22/2003(2)	02/22/2012	Common Stock	3,945
Option buy communications		\$ 13.08	11/30/2006	11/30/2006	M	5,000	01/28/2004(4)	01/28/2013	Common Stock	5,000

Reporting Owners

Reporting Owner Name / Address		Rel	ationships	
	ъ.	100 0	0.00	0.1

Director 10% Owner Officer Other

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

VP and CFO

Signatures

Stephen C. 12/04/2006 Erickson

**Signature of Date
Reporting 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) Transaction pursuant to the Reporting Person's 10b5-1 plan.
- (2) Option vested as to 1/4 of the shares subject to the option on the "Date Exercisable" and each anniversary thereof.
- (3) Not applicable.

Reporting Owners 2

Edgar Filing: ALTIRIS INC - Form 4

(4) Option vests at to 1/4 of the shares subject to the option on the "Date Exercisable" and each anniversary thereof.

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.