

Bone Jane E  
 Form 3  
 February 09, 2007

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

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**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

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

(Print or Type Responses)

1. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name <b>and</b> Ticker or Trading Symbol	
Â Bone Jane E		(Month/Day/Year)	WIND RIVER SYSTEMS INC [WIND]	
(Last)	(First)	(Middle)	4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
		02/01/2007		
C/O 500 WIND RIVER WAY			(Check all applicable)	6. Individual or Joint/Group Filing(Check Applicable Line)
	(Street)		<input type="checkbox"/> Director <input type="checkbox"/> 10% Owner	<input checked="" type="checkbox"/> Form filed by One Reporting Person
ALAMEDA,Â CAÂ 94501			<input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other	<input type="checkbox"/> Form filed by More than One Reporting Person
(City)	(State)	(Zip)	(give title below)	(specify below)
			Chief Accounting Officer	

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	0	D	Â

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

SEC 1473 (7-02)

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**Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of	

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				Shares		(I) (Instr. 5)	
Non-Qualified Stock Option (right to buy)	09/24/2002 <sup>(1)</sup>	09/24/2011	Common Stock	6,355	\$ 10.4	D	Â
Non-Qualified Stock Option (right to buy)	07/21/2005 <sup>(2)</sup>	10/21/2008	Common Stock	125	\$ 6.92	D	Â
Non-Qualified Stock Option (right to buy)	12/19/2004 <sup>(1)</sup>	12/19/2013	Common Stock	10,000	\$ 8.07	D	Â
Non-Qualified Stock Option (right to buy)	03/19/2005 <sup>(1)</sup>	03/19/2014	Common Stock	10,000	\$ 10.33	D	Â
Non-Qualified Stock Option (right to buy)	06/21/2006 <sup>(1)</sup>	06/21/2012	Common Stock	50,000	\$ 15.71	D	Â
Non-Qualified Stock Option (right to buy)	10/07/2006 <sup>(1)</sup>	10/07/2012	Common Stock	18,000	\$ 12.51	D	Â

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Bone Jane E C/O 500 WIND RIVER WAY ALAMEDA, CA 94501	Â	Â	Â Chief Accounting Officer	Â

## Signatures

/s/ Jane E. Bone                      02/09/2007  
 \*\*Signature of                      Date  
 Reporting Person

## Explanation of Responses:

- \* If the form is filed by more than one reporting person, see Instruction 5(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).
- One year from the date of grant, 25% of the shares subject to the option shall vest and 1/48 of the shares subject to the option shall vest
- (1) each month thereafter. The one year anniversary of the vest start date or the date when this option first became exercisable is indicated in this column 2.
  - (2) 100% of the outstanding shares subject to this option became vested on July 21, 2005.

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.