Edgar Filing: Caine Brett - Form 4

Caine Brett										
Form 4										
February 18, 2										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION							т	PPROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287		
Check this if no longe subject to	er STATEM		CHANGES IN BENEFICIAL OW				NERSHIP OF	Expires: Estimated a	January 31, 2005 Javerage	
Section 16		SECURITIES					burden hours per			
Form 4 or Form 5 obligations may continue. See Instruction 1(b). Form 5 obligations may continue. See Instruction 1(b). 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								0.5		
(Print or Type R	esponses)									
			2. Issuer Name and Ticker or Trading Symbol CITRIX SYSTEMS INC [CTXS]				5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (M	liddle) 3. Date of	f Earliest Tra	ansaction			(Cnec	ck all applicable	e)	
(Mo			(Month/Day/Year) 02/13/2009				Director 10% Owner X Officer (give title Other (specify below) below) SVP, Online Services Division			
	4. If Am	4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
Filed(Month/Day/Year) Applicable Line) _X_ Form filed by						One Reporting Person fore than One Reporting				
(City)	(State) (2	Zip) Tab	le I - Non-Do	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Code (Instr. 8)	Disposed	l (A) o l of (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)	
$\frac{\text{Common}}{\text{Stock } (\underline{1})}$	02/13/2009		A	4,500	A	\$ 0	65,704 <u>(2)</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)

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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. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title Amoun Underl Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own 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						
Direc	tor 10% Owner	r Officer	Other				
Caine Brett C/O CITRIX SYSTEMS, INC. 851 WEST CYPRESS CREEK ROAD FORT LAUDERDALE, FL 33309		SVP, Online Services Division					
Signatures							
/s/Antonio Gomes, Attorney-in-Fact for Brett	M.	02/18/2009					
**Signature of Reporting Person		Date					
Explanation of Responses	-						

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* 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).

- These shares of common stock are issuable pursuant to awards of performance-based restricted stock units that vest in three annual (1) installments beginning on April 30, 2008 (the "grant date"), with 33.4% vesting on the first anniversary of the grant date and 33.3% vesting on each of the second and third anniversaries of the grant date.
- (2) Includes 387 shares acquired under the CTXS stock purchase plan on January 30, 2009.

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.