EBERHARD STEPHEN P

Form 4 June 18, 2007

FORM 4

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

OMB

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

3235-0287 Number: January 31, Expires:

2005

OMB APPROVAL

Form 4 or Form 5 obligations

may continue.

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

burden hours per response... 0.5

Estimated average

See Instruction 1(b).

Common

Stock

06/14/2007

(Print or Type Responses)

1. Name and Address of Reporting Person * EBERHARD STEPHEN P			2. Issuer Name and Ticker or Trading Symbol SIMPSON MANUFACTURING CO					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Loot)	(First) (I	Middle)	INC /CA/ [NYSE:SSD]				Director 10% Owner				
(Last)	(Filst) (1	viidale)	(Month/E	Earliest Transaction ay/Year)				_X_ Officer (give	titleOthe	er (specify	
5956 W. LAS POSITAS BLVD.			06/14/2007					below) President, Simpson Dura-Vent			
(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			
PLEASAN						Form filed by More than One Reporting Person					
(City)	(State)	(Zip)	Tabl	le I - Non-D	Perivative S	Securit	ies Acq	uired, Disposed of	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any		3. Transactic Code (Instr. 8)	4. Securiti on(A) or Dis (Instr. 3, 4)	sposed	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)	
Common Stock								85,692	D		

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

<u>J(4)</u>

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11,195 A $\frac{\$}{32.57}$ 12,285 $\frac{(3)}{}$

By Trust

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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. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			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
Options on Common Stock	\$ 16.45					02/01/2003(1)	12/31/2009	Common Stock	10,000
Options on Common Stock	\$ 25.43					01/01/2005(2)	12/31/2010	Common Stock	10,000
Options on Common Stock	\$ 34.9					01/01/2006(2)	12/31/2011	Common Stock	16,000

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

EBERHARD STEPHEN P 5956 W. LAS POSITAS BLVD. PLEASANTON, CA 94588

President, Simpson Dura-Vent

Signatures

Stephen P. 06/18/2007 Eberhard

**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) This date represents the date of the first monthly vesting period. This option vests equally over 48 months beginning with the date of grant.

Reporting Owners 2

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- (2) This date represents the date of the first annual vesting period. This option vests equally over 4 years beginning with the date of grant.
- (3) The shares are owned by the Simpson Manufacuturing Co., Inc. Profit Sharing Plan for Salaried Employees (the "Plan") of which the reporting person is a participant. The Plan is qualified under sections 401(a)(26) and 410 of the Internal Revenue Code.
- (4) The shares were acquired as a result of a realignment of Plan investments.

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.