Edgar Filing: REED ROBERT - Form 4

| REED ROP Form 4 | | | | | | | | | | |
|---|---|--|---|--|------------------------|------------------|--|--|---|--|
| Washington, D.C. 20549 Nu Check this box if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF Section 16. SECURITIES | | | | | | | | APPROVAL 3235-0287 | | |
| | | | | | | | Estimated burden hou response 1, | urs per | | |
| (Print or Type | Responses) | | | | | | | | | |
| REED ROBERT Symi ALT (Last) (First) (Middle) 3. Da (Mon | | | 2. Issue Symbol | er Name an | d Ticker or | Trading | 5. Relationship of Reporting Person(s) to Issuer | | | |
| | | | ALTERA CORP [ALTR] | | | | (Check all applicable) | | | |
| | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/10/2005 | | | | X_ Director 10% Owner Officer (give title Other (specify below) below) | | | |
| Filed(Mo | | | | mendment, Date Original /Ionth/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 | | | |
| SAN JOSE | E, CA 95134 | | | | | | Person | | oporting | |
| (City) | (State) | (Zip) | Tab | ole I - Non- | Derivative | Securities A | Acquired, Disposed | d of, or Beneficia | lly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deema Execution any (Month/Da | Date, if | 3. Transactic Code (Instr. 8) Code V | Disposed (Instr. 3, | (A) or 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) | |
| Reminder: Re | port on a separate line | e for each cla | ass of sec | urities bene | Perso | ons who res | or indirectly. spond to the coll tained in this for | | SEC 1474 (9-02) | |

Persons who respond to the collection of SEC 14 information contained in this form are not (9required 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 | 2. | 3. Transaction Date | 3A. Deemed | 4. | 5. Number of | 6. Date Exercisable and | 7. Title and Amour |
|-------------|-------------|---------------------|--------------------|------------|--------------|-------------------------|--------------------|
| Derivative | Conversion | (Month/Day/Year) | Execution Date, if | Transactio | nDerivative | Expiration Date | Underlying Securit |
| Security | or Exercise | | any | Code | Securities | (Month/Day/Year) | (Instr. 3 and 4) |
| (Instr. 3) | Price of | | (Month/Day/Year) | (Instr. 8) | Acquired (A) | | |

Derivative or Disposed of Security (D) (Instr. 3, 4, and 5) Code V Expiration Title (A) (D) Date Amo Exercisable Date or Num of SI Non-Qualified Common Stock Option \$20.73 05/10/2005 V 10,000 (1) 05/10/2015 10, Α Stock (right to buy)

Reporting Owners

| Reporting Owner Name / Address | | Relationships | | | | | | |
|---|----|---------------|-----------|---------|-------|--|--|--|
| | | Director | 10% Owner | Officer | Other | | | |
| REED ROBERT 101 INNOVATION DRIVE SAN JOSE, CA 95134 | 3 | Х | | | | | | |
| Signatures | | | | | | | | |
| Robert Reed | 05 | /12/2005 | | | | | | |
| <u>**</u> 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) Exercisable cumulatively with respect to 8.333% on the first day of the month following the date of grant and then 8.33% on the first day of each month thereafter, provided that the Optionee continues to serve as a Director on such dates.
- (2) The per share exercise price for the Shares to be issued pursuant to exercise of an Option shall be no less than 100% of the Fair Market Value per share on the date of Grant.

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.