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SIMULATIC	ONS PLUS IN	C										
Form 4												
December 26	5, 2007											
FORM	4			ITIC						OMB AF	PPROVAL	
	UNITE	ED STATES				ND EXC D.C. 205		IGE C	COMMISSION	OMB Number:	3235-0287	
Check thi										Expires:	January 31,	
if no longer subject to STATEMENT OF CHANG				GES IN BENEFICIAL OWN					NERSHIP OF		ated average	
Section 1					Rľ	TIES				burden hou	•	
Form 4 or			~		_	~	_	_		response	0.5	
Form 5 obligation	• • • • • • • • • • • • • • • • • • • •	•						•	e Act of 1934,			
may cont				•		U			1935 or Section	n		
See Instru	iction	30(h)) of the In	vestmen	t C	Company	Act	of 194	0			
1(b).												
(Print or Type F	Responses)											
	•											
1. Name and Address of Reporting Person <u>2</u> . Issuer Name					ame and Ticker or Trading				5. Relationship of Reporting Person(s) to			
DAHLEN JI	EFFREY A		Symbol	-					Issuer			
SIMUL				ULATIONS PLUS INC [SLP]					(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of	Earliest 7	Frar	nsaction			(Chee	k all applicable	<i>;</i>)	
			(Month/D	nth/Day/Year)					Director 10% Owner			
42505 10TH STREET WEST 12/21/2			/21/2007					X_ Officer (give title Other (specify below) below)				
									· · · · · · · · · · · · · · · · · · ·	of Words+ subs	idiary	
	(Street)		4. If Ame	ndment, D	Date	Original			6. Individual or Jo	oint/Group Filir	1g(Check	
			d(Month/Day/Year)					Applicable Line)				
									X Form filed by C			
LANCAST	ER, CA 93534	ļ							Person	Iore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-	De	rivative S	ecurit	ies Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction I	Date 2A. Dee	emed	3.	4	4. Securiti	ies Aco	quired	5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Ye		on Date, if			(A) or Dis			Securities	Form: Direct		
(Instr. 3)		any (Month)	Dou/Voor)	Code		(Instr. 3, 4	and 5)	Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership	
		(WORLD	/Day/Year)	(Instr. 8)	,				Following	(Instr. 4)	(Instr. 4)	
							(A)		Reported			
							or		Transaction(s) (Instr. 3 and 4)			
				Code V	V	Amount	(D)	Price	(Illsu. 5 allu 4)			
Common Stock	12/21/2007			М	,	70,000	А	\$ 1.15	130,000	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)

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. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (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
Stock Option	\$ 1.15	12/21/2007		Х	70,000	04/16/2004	04/16/2014	Common Stock	70,000

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Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
DAHLEN JEFFREY A 42505 10TH STREET WEST LANCASTER, CA 93534			President of Words+ subsidiary					
Signatures								
Jeffrey A. 1 Dahlen	2/26/2007							

<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).

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.