## Edgar Filing: SM&A - Form 4

SM&A												
Form 4 June 15, 200	07											
FORM	ЛЛ	STATES	SECU	RITIES A	AND EX	CHA	ANGE C	OMMISSION	OMB A			
Check f	his hov		Wa	ashington	n, D.C. 20	)549			Number:	3235-0287		
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations Filed pursuant to S Section 17(a) of the F				SECU 16(a) of the	<b>RITIES</b> he Securi	ties I	Exchange	e Act of 1934,	Expires: January 3 20 Estimated average burden hours per response			
may cor <i>See</i> Inst 1(b).	ruction			nvestmen	•	-	•					
(Print or Type	Responses)											
1. Name and Address of Reporting Person <u>*</u> MYERS STEVEN S			2. Issuer Name <b>and</b> Ticker or Trading Symbol SM&A [WINS]					5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First) (	Middle)		of Earliest 7	Fransaction			(Checl	k all applicabl	le)		
				(Month/Day/Year) 06/13/2007				Director 10% Owner Officer (give titleX Other (specify below) below) Former Chairman and CEO				
				. If Amendment, Date Original Filed(Month/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> <li>Person</li> </ul>				
(City)	(State)	(Zip)	Tał	ole I - Non-	Derivative	Secu	rities Aca	uired, Disposed of	. or Beneficia	ally Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deem Execution any (Month/Da	ed Date, if	3. Transactio Code (Instr. 8)		ies Ac ed of (	equired (A) (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	06/13/2007			S	32,000		\$ 6.9528	3,099,776 <u>(1)</u>	I	Steven S. Myers Revocable Trust and Steven S. Myers Grantor Retained Annuity Trust		

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)	4. Transact Code (Instr. 8)	5. ionNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	3	ate	Amou Under Secur	rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	<sup>7</sup> (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships						
	Director	10% Owner	Officer	Other			
MYERS STEVEN S 4695 MACARTHUR COURT, 8TH FLOOR NEWPORT BEACH, CA 92660				Former Chairman and CEO			
Signatures							

/s/ Irma Y. Eggert, by Power of Attorney

<u>\*\*</u>Signature of Reporting Person

06/15/2007 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).

This represents: (i) 1,000,000 shares of the company's common stock held in the Steven S. Myers Grantor Retained Annuity Trust; (ii) 2,088,109 shares of the company's common stock held in the Steven S. Myers Revocable Trust; and (iii) 11,667 shares owned

(1) beneficially and of record by Melissa Myers, Mr. Myers daughter. Ms. Myers is economically dependent on Mr. Myers and, as a result, Mr. Myers holds an indirect beneficial ownership interest in such shares.

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.