

Headley Todd P  
Form 3  
March 08, 2007

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

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**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

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

(Print or Type Responses)

1. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name <b>and</b> Ticker or Trading Symbol	
Â Headley Todd P		(Month/Day/Year)	SOURCEFIRE INC [FIRE]	
(Last)	(First)	(Middle)	03/08/2007	
9770 PATUXENT WOODS DRIVE			4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
(Street)			(Check all applicable)	
COLUMBIA,Â MDÂ 21046			<input type="checkbox"/> Director	<input type="checkbox"/> 10% Owner
(City)			<input checked="" type="checkbox"/> Officer	<input type="checkbox"/> Other
(State)			(give title below)	(specify below)
(Zip)			CFO & Treasurer	6. Individual or Joint/Group Filing(Check Applicable Line)
				<input checked="" type="checkbox"/> Form filed by One Reporting Person
				<input type="checkbox"/> Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

SEC 1473 (7-02)

**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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect (I)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	

(Instr. 5)

Employee Stock Option (right to buy)	04/21/2003 <sup>(1)</sup>	04/18/2013	Common Stock	105,911	\$ 0.325	D	Â
Employee Stock Option (right to buy)	12/01/2004 <sup>(2)</sup>	12/21/2014	Common Stock	24,630	\$ 1.62	D	Â
Employee Stock Option (right to buy)	06/24/2006 <sup>(3)</sup>	06/24/2015	Common Stock	23,399	\$ 2.03	D	Â

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Headley Todd P 9770 PATUXENT WOODS DRIVE COLUMBIA, MD 21046	Â	Â	Â CFO & Treasurer	Â

## Signatures

/s/ Joseph M. Boyle as  
Attorney-in-Fact

03/08/2007

\_\_Signature of Reporting Person

Date

## Explanation of Responses:

- \* If the form is filed by more than one reporting person, *see* Instruction 5(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) Options vest in equal quarterly installments over four years, commencing on April 21, 2003. Options also accelerate and become fully vested if there is a change in control and the holder's employment is terminated without cause subsequent to the change in control.
- (2) Options vest in equal quarterly installments over four years, commencing on December 1, 2004. Options also accelerate and become fully vested if there is a change in control and the holder's employment is terminated without cause.
- (3) Options vest 25% on June 24, 2006 and in equal monthly installments of 2.083% over the subsequent three years. Options also accelerate and become fully vested if there is a change in control and the holder's employment is terminated without cause within one year after the change in control subsequent to the change in control.

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.