WENDYS INTERNATIONAL INC Form SC 13D/A May 31, 2006

UNITED STATES

SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549
SCHEDULE 13D
Under the Securities Exchange Act of 1934 (Amendment No.4)*
Wendy s International, Inc.
(Name of Issuer)
Common Shares \$.10 stated value (Title of Class of Securities)
950590109 (CUSIP Number)

Stuart I. Rosen, Esq.

General Counsel

Trian Fund Management, L.P.

280 Park Avenue, 41st Floor

New York, New York 10017

(212)	451-3000	
(Z Z)	14.717000	

(Name, Address and Telephone Number of Person Authorized to

Receive Notices and Communications)

May 30, 2006

(Date of Event which Requires Filing of this Statement)

If the filing person has previously filed a statement on Schedule 13G to report the acquisition that is the subject of this Schedule 13D, and is filing this schedule because of ss.ss.240.13d-1(e), 240.13d-1(f) or 240.13d-1(g), check the following box //.

NOTE: Schedules filed in paper format shall include a signed original and five copies of the schedule, including all exhibits. See Rule 13d-7 for other parties to whom copies are to be sent.

*The remainder of this cover page shall be filled out for a reporting person's initial filing on this form with respect to the subject class of securities, and for any subsequent amendment containing information which would alter disclosures provided in a prior cover page.

The information required on the remainder of this cover page shall not be deemed to be "filed" for the purpose of Section 18 of the Securities Exchange Act of 1934 ("Act") or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, see the Notes).

1

SCHEDULE 13D

CUSIP No. 950590109

- NAME OF REPORTING PERSON Trian Fund Management, L.P.
 - S.S. OR I.R.S. IDENTIFICATION NO. OF ABOVE PERSON: 20-3454182

2	CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP	(a) /X/ (b) / /
3	SEC USE ONLY	(6) / /
4	SOURCE OF FUNDS 00	
5	CHECK BOX IF DISCLOSURE OF LEGAL PROCEEDINGS IS REQUIRED PURSUANT TO ITEMS 2(d) or 2(e)	/ /
6	CITIZENSHIP OR PLACE OF ORGANIZATION Delaware	
NUME	BER OF SHARES BENEFICIALLY OWNED BY EACH REPORTING PERSON WITH:	
7	SOLE VOTING POWER 0	
8	SHARED VOTING POWER 7,998,200	
9	SOLE DISPOSITIVE POWER 0	
10	SHARED DISPOSITIVE POWER 7,998,200	
11	AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 7,998,200	
12	CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (11) EXCLUDES CERTAIN SHARES	
13	/ / PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (11) 6.9%	
14	TYPE OF REPORTING PERSON PN	
	2	
	SCHEDULE 13D	

CUSIP No. 950590109

1 NAME OF REPORTING PERSON

Trian Fund Management GP, LLC

S.S. OR I.R.S. IDENTIFICATION NO. OF ABOVE PERSON: 20-3454087

		(a) /X/
3 SEC USE ONLY		(b) / /
4 SOURCE OF FUND	S 00	
5 CHECK BOX IF D ITEMS 2(d) or	ISCLOSURE OF LEGAL PROCEEDINGS IS REQUIRED PURSUANT TO 2(e) //	
6 CITIZENSHIP OR	PLACE OF ORGANIZATION Delaware	
NUMBER OF SHARES BE	NEFICIALLY OWNED BY EACH REPORTING PERSON WITH:	
7 SOLE VOTING PO	WER 0	
8 SHARED VOTING	POWER 7,998,200	
9 SOLE DISPOSITI	VE POWER 0	
10 SHARED DISPOSI	TIVE POWER 7,998,200	
11 AGGREGATE AMOU	NT BENEFICIALLY OWNED BY EACH REPORTING PERSON 7,998,200	
	HE AGGREGATE AMOUNT IN ROW (11) EXCLUDES CERTAIN SHARES	
13 PERCENT OF CLA	SS REPRESENTED BY AMOUNT IN ROW (11) 6.9%	
14 TYPE OF REPORT 00	ING PERSON	
	3	

SCHEDULE 13D

CUSIP No. 950590109

1 NAME OF REPORTING PERSON

Trian Partners GP, L.P.

S.S. OR I.R.S. IDENTIFICATION NO. OF ABOVE PERSON: 20-3453775

2 CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP

(a) /X/

(b) / /

- 3 SEC USE ONLY
- 4 SOURCE OF FUNDS

00

- 5 CHECK BOX IF DISCLOSURE OF LEGAL PROCEEDINGS IS REQUIRED PURSUANT TO ITEMS 2(d) or 2(e) //
- 6 CITIZENSHIP OR PLACE OF ORGANIZATION
 Delaware

NUMBER OF SHARES BENEFICIALLY OWNED BY EACH REPORTING PERSON WITH:

7 SOLE VOTING POWER

O

8 SHARED VOTING POWER

3,609,533

9 SOLE DISPOSITIVE POWER

O

10 SHARED DISPOSITIVE POWER

3,609,533

- 11 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 3,609,533
- 12 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (11) EXCLUDES CERTAIN SHARES
- 13 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (11)
- 14 TYPE OF REPORTING PERSON

PN

3.1%

4

SCHEDULE 13D

1	NAME OF REPORTING PERSON Trian Partners General Partner, LLC	
	S.S. OR I.R.S. IDENTIFICATION NO. OF ABOVE PERSON: 20-3453595	
2	CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP	(a) /X/ (b) / /
3	SEC USE ONLY	(b) / /
4	SOURCE OF FUNDS 00	
5	CHECK BOX IF DISCLOSURE OF LEGAL PROCEEDINGS IS REQUIRED PURSUANT TO ITEMS 2(d) or 2(e) //	
6	CITIZENSHIP OR PLACE OF ORGANIZATION Delaware	
NUME	BER OF SHARES BENEFICIALLY OWNED BY EACH REPORTING PERSON WITH:	
7	SOLE VOTING POWER 0	
8	SHARED VOTING POWER 3,609,533	
9	SOLE DISPOSITIVE POWER 0	
10	SHARED DISPOSITIVE POWER 3,609,533	
11	AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 3,609,533	
12	CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (11) EXCLUDES CERTAIN SHARES	
13	/ / PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (11) 3.1%	
14	TYPE OF REPORTING PERSON 00	
	-	

CUSIP No. 950590109

1 NAME OF REPORTING PERSON

Trian Partners, L.P.

S.S. OR I.R.S. IDENTIFICATION NO. OF ABOVE PERSON: 20-3453988

2 CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP

(a) /X/

(b) / /

- 3 SEC USE ONLY
- 4 SOURCE OF FUNDS

WC

- 5 CHECK BOX IF DISCLOSURE OF LEGAL PROCEEDINGS IS REQUIRED PURSUANT TO ITEMS 2(d) or 2(e) //
- 6 CITIZENSHIP OR PLACE OF ORGANIZATION
 Delaware

NUMBER OF SHARES BENEFICIALLY OWNED BY EACH REPORTING PERSON WITH:

7 SOLE VOTING POWER

0

8 SHARED VOTING POWER

666,120

9 SOLE DISPOSITIVE POWER

0

10 SHARED DISPOSITIVE POWER

666,120

11 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON

666,120

12 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (11) EXCLUDES CERTAIN SHARES

/ /

13 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (11)

0.6%

14 TYPE OF REPORTING PERSON

PN

CUSIP No. 950590109

1 NAME OF REPORTING PERSON

Trian Partners Master Fund, L.P.

S.S. OR I.R.S. IDENTIFICATION NO. OF ABOVE PERSON: 98-0468601

2 CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP

(a) /X/

(b) / /

- 3 SEC USE ONLY
- 4 SOURCE OF FUNDS

WC

- 5 CHECK BOX IF DISCLOSURE OF LEGAL PROCEEDINGS IS REQUIRED PURSUANT TO ITEMS 2(d) or 2(e) //
- 6 CITIZENSHIP OR PLACE OF ORGANIZATION Cayman Islands

NUMBER OF SHARES BENEFICIALLY OWNED BY EACH REPORTING PERSON WITH:

7 SOLE VOTING POWER

0

8 SHARED VOTING POWER

2,757,316

9 SOLE DISPOSITIVE POWER

0

10 SHARED DISPOSITIVE POWER

2,757,316

11 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON

2,757,316

12 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (11) EXCLUDES CERTAIN SHARES

/ /

13 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (11)

2.4%

14 TYPE OF REPORTING PERSON

PN

CUSIP No. 950590109

1 NAME OF REPORTING PERSON

Trian Partners Master Fund (Non-ERISA), L.P.

S.S. OR I.R.S. IDENTIFICATION NO. OF ABOVE PERSON: 98-0471467

2 CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP

(a) /X/

(b) / /

- 3 SEC USE ONLY
- 4 SOURCE OF FUNDS

WC

- 5 CHECK BOX IF DISCLOSURE OF LEGAL PROCEEDINGS IS REQUIRED PURSUANT TO ITEMS 2(d) or 2(e) //
- 6 CITIZENSHIP OR PLACE OF ORGANIZATION

 Cayman Islands

NUMBER OF SHARES BENEFICIALLY OWNED BY EACH REPORTING PERSON WITH:

7 SOLE VOTING POWER

0

8 SHARED VOTING POWER

186,097

9 SOLE DISPOSITIVE POWER

0

10 SHARED DISPOSITIVE POWER

186,097

- 11 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 186,097
- 12 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (11) EXCLUDES CERTAIN SHARES
- 13 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (11)

0.2%

14 TYPE OF REPORTING PERSON

PN

CUSIP No. 950590109

1 NAME OF REPORTING PERSON

Trian Partners Parallel Fund I, L.P.

S.S. OR I.R.S. IDENTIFICATION NO. OF ABOVE PERSON: 20-3694154

2 CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP

(a) /X/

(b) / /

- 3 SEC USE ONLY
- 4 SOURCE OF FUNDS

WC

- 5 CHECK BOX IF DISCLOSURE OF LEGAL PROCEEDINGS IS REQUIRED PURSUANT TO ITEMS 2(d) or 2(e) //
- 6 CITIZENSHIP OR PLACE OF ORGANIZATION

 Delaware

NUMBER OF SHARES BENEFICIALLY OWNED BY EACH REPORTING PERSON WITH:

7 SOLE VOTING POWER

0

8 SHARED VOTING POWER

153,606

9 SOLE DISPOSITIVE POWER

0

10 SHARED DISPOSITIVE POWER

153,606

11 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON

153,606

12 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (11) EXCLUDES CERTAIN SHARES

/ /

13 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (11)

0.1%

14 TYPE OF REPORTING PERSON

PN

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1	NAME OF REPORTING PERSON Trian Partners Para	llel Fund I General Partner, LLC	
	S.S. OR I.R.S. IDENTIFICATION	NO. OF ABOVE PERSON: 20-3694293	
2	CHECK THE APPROPRIATE BOX IF	A MEMBER OF A GROUP	(a) /X
3	SEC USE ONLY		(b) /
4	SOURCE OF FUNDS 00		
5	CHECK BOX IF DISCLOSURE OF LE ITEMS 2(d) or 2(e)	GAL PROCEEDINGS IS REQUIRED PURSUANT TO //	
6	CITIZENSHIP OR PLACE OF ORGAN Delaware	IZATION	
NUMB	ER OF SHARES BENEFICIALLY OWNE	D BY EACH REPORTING PERSON WITH:	
7	SOLE VOTING POWER	0	
8	SHARED VOTING POWER	153,606	
9	SOLE DISPOSITIVE POWER	0	
10	SHARED DISPOSITIVE POWER	153,606	
11	AGGREGATE AMOUNT BENEFICIALLY	OWNED BY EACH REPORTING PERSON 153,606	
12		OUNT IN ROW (11) EXCLUDES CERTAIN SHARES	
13	PERCENT OF CLASS REPRESENTED 0.1%	BY AMOUNT IN ROW (11)	
14	TYPE OF REPORTING PERSON 00		

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1 NAME OF REPORTING PERS	RSON
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Trian Partners Parallel Fund II, L.P.

S.S. OR I.R.S. IDENTIFICATION NO. OF ABOVE PERSON: 87-0763105

2 CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP

(a) /X/

(b) / /

- 3 SEC USE ONLY
- 4 SOURCE OF FUNDS

WC

5 CHECK BOX IF DISCLOSURE OF LEGAL PROCEEDINGS IS REQUIRED PURSUANT TO ITEMS 2(d) or 2(e)

//

6 CITIZENSHIP OR PLACE OF ORGANIZATION
Delaware

NUMBER OF SHARES BENEFICIALLY OWNED BY EACH REPORTING PERSON WITH:

7 SOLE VOTING POWER

0

8 SHARED VOTING POWER

34,820

9 SOLE DISPOSITIVE POWER

0

10 SHARED DISPOSITIVE POWER

34,820

- 11 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 34,820
- 12 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (11) EXCLUDES CERTAIN SHARES
- 13 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (11)

0.0%

14 TYPE OF REPORTING PERSON

PN

IIC:	ГD	Nο	956	150	'n	16	'n	۱
 115	ייו	MO	451	176	4101	11.	ľ	۱

1	NAME OF REPORTING PERSON Trian Partners Para	llel Fund II GP, L.P.	
	S.S. OR I.R.S. IDENTIFICATION	NO. OF ABOVE PERSON: 87-0763102	
2	CHECK THE APPROPRIATE BOX IF	A MEMBER OF A GROUP	(a) /X/ (b) / /
3	SEC USE ONLY		(0) / /
4	SOURCE OF FUNDS 00		
5	CHECK BOX IF DISCLOSURE OF LEGITEMS 2(d) or 2(e)	GAL PROCEEDINGS IS REQUIRED PURSUANT TO	
6	CITIZENSHIP OR PLACE OF ORGAN: Delaware	IZATION	
NUMB	ER OF SHARES BENEFICIALLY OWNE	D BY EACH REPORTING PERSON WITH:	
7	SOLE VOTING POWER	0	
8	SHARED VOTING POWER	34,820	
9	SOLE DISPOSITIVE POWER	0	
10	SHARED DISPOSITIVE POWER	34,820	

11 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON

34,820

12 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (11) EXCLUDES CERTAIN SHARES

/ /

13 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (11)

0.0%

14 TYPE OF REPORTING PERSON

PN

CUSIP No. 950590109

1 NAME OF REF	PORTING	PERSON
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Trian Partners Parallel Fund II General Partner, LLC

S.S. OR I.R.S. IDENTIFICATION NO. OF ABOVE PERSON: 87-0763099

2 CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP

(a) /X/

(b) / /

- 3 SEC USE ONLY
- 4 SOURCE OF FUNDS

00

5 CHECK BOX IF DISCLOSURE OF LEGAL PROCEEDINGS IS REQUIRED PURSUANT TO ITEMS 2(d) or 2(e)

/ /

6 CITIZENSHIP OR PLACE OF ORGANIZATION
Delaware

NUMBER OF SHARES BENEFICIALLY OWNED BY EACH REPORTING PERSON WITH:

7 SOLE VOTING POWER

0

8 SHARED VOTING POWER

34,820

9 SOLE DISPOSITIVE POWER

0

10 SHARED DISPOSITIVE POWER

34,820

- 11 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 34,820
 - CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (11) EXCLUDES CERTAIN SHARES
- 13 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (11)

0.0%

14 TYPE OF REPORTING PERSON

12

00

/ /

CUSIP No. 950590109

1 NAME OF REPORTING PERSON Nelson Peltz

S.S. OR I.R.S. IDENTIFICATION NO. OF ABOVE PERSON: 099-32-7311

2 CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP