Edgar Filing: CISCO SYSTEMS, INC. - Form 4

CISCO SYS	TEMS, INC.										
Form 4											
November 1	5, 2015										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB APPROVAL		
	UNITE	D STATES		RITIES A shington,			NGE C	COMMISSION	OMB Number:	3235-0287	
Check this box									Expires:	January 31, 2005	
if no longer subject to Section 16. STATEMENT OF			F CHAN	GES IN SECUR		[CIA	NERSHIP OF	Estimated average burden hours per			
Form 4 or								response			
Form 5 obligation	no *						•	e Act of 1934,			
may cont	inue. Section 1			•	•	· ·		1935 or Section	1		
See Instru 1(b).	action	50(11)	of the m	vestment	Compan	y Ac	1 01 194	Ю			
(Print or Type I	Responses)										
			Symbol	r Name and			-	5. Relationship of Reporting Person(s) to Issuer			
(SYSTEM	IS, INC.	[CSC	CO]	(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of	f Earliest Tr	ansaction			(chici		,	
				onth/Day/Year)				Director 10% Owner X Officer (give title Other (specify			
170 WEST	11/13/2015					below) below) SVP & Chief Marketing Officer					
				ndment, Da	te Origina	l		6. Individual or Joint/Group Filing(Check			
				nth/Day/Year)			Applicable Line)			
SAN JOSE,	CA 95134							_X_ Form filed by C Form filed by M Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	lv Owned	
1.Title of	2. Transaction D	Date 2A Deer		3.			_	5. Amount of	6. Ownership	-	
Security	(Month/Day/Ye		on Date, if	3. 4. Securities Acquired Transaction(A) or Disposed of (D)			Securities	Form: Direct			
(Instr. 3)		any (Month/	Code (Instr. 3, 4 and 5) Day/Year) (Instr. 8)					Beneficially Owned	Indirect (I) Owners	Beneficial	
		(INIOIIUI)	(Instr. 8)					(Instr. 4)			
						(A)		Reported			
						or		Transaction(s) (Instr. 3 and 4)			
Comment				Code V		(D)	Price	(2115tr. 5 tilter 1)			
Common Stock	11/13/2015			F	1,957 (1)	D	\$ 27.83	229,628	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. Titl	e of 2.		3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title	e and	8. Price of	9. Nu
Deriva	ative Conv	resion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration D	late	Amou	nt of	Derivative	Deriv
Securi	ty or Ex	ercise		any	Code	of	(Month/Day/	(Year)	Under	lying	Security	Secu
(Instr.	3) Price	of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ties	(Instr. 5)	Bene
	Deriv	ative		•		Securities			(Instr.	3 and 4)		Owne
	Secur	rity				Acquired				, í		Follo
		,				(A) or						Repo
						Disposed						Trans
						of (D)						(Instr
						(Instr. 3,						(
						(insu: 5, 4, and 5)						
						r, and 5)						
										Amount		
							Date	Expiration		or		
								Expiration	Title	Number		
							Exercisable	Date		of		
					Code V	(A) (D)				Shares		

Edgar Filing: CISCO SYSTEMS, INC. - Form 4

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Walker Karen 170 WEST TASMAN DRIVE SAN JOSE, CA 95134			SVP & Chief Marketing Officer					
Signatures								
/s/ Karen Walker by Prat Bhatt, Attorney-in-Fact			11/16/2015					
<u>**</u> Signature of Reporting Perso	on		Date					
Explanation of Pa	onon	0001						

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) Represents shares withheld for payment of tax liability arising as a result of the partial settlement of a restricted stock unit award originally reported by the reporting person in a Form 3 filed with the Commission on May 15, 2015.

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.