Edgar Filing: PortalPlayer, Inc. - Form 4

| PortalPlayer, In | IC. | | | | | | | | | | | |
|--|--------------------|--|--|------------------------------|-------------|------------|---|------------------------------------|---------------------------------------|-------------------------|--|--|
| Form 4 | | | | | | | | | | | | |
| May 04, 2005 | Л | | | | | | | | OMB A | PPROVAL | | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION | | | | | | | | OIIID | 3235-0287 | | | |
| Check this box Washington, D.C. 20549 | | | | | | | | Number: | | | | |
| if no longer STATEMENT OF CHANCES IN BENEFICIAL OWNERS | | | | | | NFRSHIP OF | Expires: | January 31, 2005 | | | | |
| subject to Section 16. | DIMIL | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIT O SECURITIES | | | | | | | Estimated average burden hours per | | | |
| Form 4 or | | | | | | | | | response | • | | |
| Form 5 obligations | - | | | | | | | ge Act of 1934, | | | | |
| may continu | e. | | | llity Hold | • | - · | | f 1935 or Sectio | n | | | |
| See Instructi 1(b). | on | 50(II) | of the my | | company | y Act | 0117 | -0 | | | | |
| | | | | | | | | | | | | |
| (Print or Type Res | ponses) | | | | | | | | | | | |
| 1. Name and Address of Reporting Person _2. Issuer Name and Ticker or Trading5. Relationship of Reporting Person(s) to | | | | | | | | son(s) to | | | | |
| DENERO HENRY T Symbol | | | | | | | | Issuer | | | | |
| | | | | ortalPlayer, Inc. [PLAY] | | | | (Check all applicable) | | | | |
| (Last) | (First) (| Middle) | | Earliest Tra | insaction | | | X Director | 100 | 6 Owner | | |
| | | | | Ionth/Day/Year) 5/03/2005 | | | | Officer (give title Other (specify | | | | |
| BOULEVARD, BLDG. 1 below) below) | | | | | | | | | | | | |
| (Street) 4. If Ame | | | | Amendment, Date Original | | | 6. Individual or Joint/Group Filing(Check | | | | | |
| Filed(Month/Day/Year) | | | | | | | Applicable Line) X Form filed by | One Reporting P | enorting Person | | | |
| SANTA CLARA, CA 95054 Form filed by More than One Reporting Person Form filed by More than One Reporting Person | | | | | | | | | | | | |
| (City) | (State) | (Zip) | Table | e I - Non-De | erivative S | ecuri | ties Ac | quired, Disposed o | f, or Beneficia | llv Owned | | |
| 1.Title of 2 | 2. Transaction Dat | te 2A. Deer | | 3. | 4. Securi | | | 5. Amount of | 6. Ownership | 7. Nature of | | |
| - | Month/Day/Year | | tion Date, if TransactionAcquired (A) or Code Disposed of (D) h/Day/Year) (Instr. 8) (Instr. 3, 4 and 5) | | | | | | Form: Direct | Indirect | | |
| (Instr. 3) | | any (Month/I | | | | | | Beneficially Owned | (D) or Indirect (I) | Beneficial Ownership | | |
| | | | | | | | | Following Reported | (Instr. 4) | (Instr. 4) | | |
| | | | | | | (A) | | Transaction(s) | | | | |
| | | | | Code V | Amount | or (D) | Price | (Instr. 3 and 4) | | | | |
| Common Stock |)5/03/2005 | | | Р | 3,000 | А | \$ 17 | 3,000 | 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)

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| 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. Transactio Code (Instr. 8) | 5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Secur | ınt of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr |
|---|---|---|---|--|---|---------------------|--------------------|-------|--|---|--|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | | |
|--|---------------|-----------|---------|-------|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | |
| DENERO HENRY T 3255 SCOTT BOULEVARD BLDG. 1 SANTA CLARA, CA 95054 | Х | | | | | | | |
| Signatures | | | | | | | | |
| /s/ Pulay Mohun, Attorney-in-H DeNero | 05/04/2005 | | | | | | | |
| <u>**</u> Signature of Reporting F | 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.