## Edgar Filing: GOSHORN RICHARD H - Form 4

GOSHORN	RICHARD H											
Form 4												
August 05, 2	2009											
FORM	14								OMB AF	PROVAL		
	UNITE	D STATE:		RITIES A shington,			NGE C	COMMISSION	OMB Number:	3235-0287		
Check th if no lon									Expires:	January 31,		
subject t	S STATE	EMENT O	F CHAN	HANGES IN BENEFICIAL OW				NERSHIP OF	Estimated a	2005 average		
Section				SECUR	ECURITIES					rs per		
Form 4 o Form 5			C (* 1	()	с ·	· -	1	A ( C1024	response	0.5		
obligatio	-						-	e Act of 1934, 1935 or Section				
may con	tinue.			vestment	U	1 v			1			
See Instr 1(b).	ruction	50(11)	) of the m	vestment	Compan	ly 110	101177					
1(0).												
(Print or Type	Responses)											
	Address of Reportir	ng Person <sup>*</sup>		suer Name <b>and</b> Ticker or Trading			5. Relationship of Reporting Person(s) to Issuer					
GOSHORN RICHARD H			•	Symbol				155001				
			VERISIGN INC/CA [VRSN]					(Check all applicable)				
(Last)	(First)	(Middle)		f Earliest Tr	ansaction							
407 E A ST 1	MIDDLEFIELI		(Month/E	•				Director X Officer (give		Owner or (specify		
40/ EASI 1	MIDDLEFIELI	J KOAD	08/04/2	009				below)	below)			
								SVP, C	GC and Secretar	У		
(Street) 4.			4. If Ame	4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
File				Filed(Month/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person				
MOUNTAI	IN VIEW, CA 9	4043						Form filed by M				
MOONTIN		1015						Person				
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Securi	ities Acq	uired, Disposed of	, or Beneficial	y Owned		
1.Title of	2. Transaction D	ate 2A. Dee	emed	3.	4. Securi		-	5. Amount of	6. Ownership			
Security	(Month/Day/Yea	on Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) Day/Year) (Instr. 8)					Securities	Form: Direct				
(Instr. 3)						5)	Beneficially Owned	(D) or Beneficial Indirect (I) Ownershi	Ownership			
		<b>X</b>		(				Following	(Instr. 4)	(Instr. 4)		
						(A)		Reported Transaction(s)				
				a		or		(Instr. 3 and 4)				
Common				Code V	Amount	(D)	Price ¢	, , ,				
Common Stock	08/04/2009			F <u>(1)</u>	644	D	\$ 20.54	67,059	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. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Securi (Instr.	int 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						
F	Director	10% Owner	Officer	Other			
GOSHORN RICHARD H 487 EAST MIDDLEFIELD ROAD MOUNTAIN VIEW, CA 94043			SVP, GC and Secretary				
Signatures							
By: Luci Altman, as attorney-in-fact Goshorn	For: Rich	nard H.	08/05/2009				

\*\*Signature of Reporting Person

## **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).
- Disposition of shares exempt under Rule 16b-3 as payment of tax liability to Company by delivery or withholding securities incident to (1) vesting of restricted stock units.

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.

Date