## Edgar Filing: CISCO SYSTEMS, INC. - Form 4

CISCO SYS	TEMS, INC.										
Form 4											
August 19, 2	015										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB AF	PROVAL	
<b>UNITED STATES SECURITIES AND EXCHANGE COMMISSION</b> Washington, D.C. 20549								OMB Number:	3235-0287		
Check thi							Expires:	January 31,			
if no longer subject to STATEMENT OF C				CHANGES IN BENEFICIAL OW				NERSHIP OF	Estimated a	2005 verage	
Section 1				SECURITIES					burden hours per		
Form 4 or Form 5		count to S	Vaction 1	f(a) of the	Soourit	ion E	vohona	h A at of 1034	response	0.5	
obligation	$^{18}$ Section 17(						-	e Act of 1934, 1935 or Section	ı		
may cont See Instru	inue.			vestment	•	· ·			1		
1(b).	letion				1	5					
(Print or Type R	Responses)										
1. Name and Address of Reporting Person       2. Issuer Name and Ticker or Trading       5. Relationship of							Reporting Pers	on(s) to			
BHATT PRAT Syr							0	Issuer			
	CISCO SYSTEMS, INC. [CSCO]					(Check all applicable)					
(Last)	(First) (A	Middle)	3. Date of	Earliest Tra	ansaction			(Cheel	k all applicable	)	
				Month/Day/Year)				Director		Owner	
			08/17/2015					XOfficer (give titleOther (specify below) below)			
								SVP, Corp	Controller &	CAO	
			4. If Ame	Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
			Filed(Mon	th/Day/Year)	1			Applicable Line) _X_ Form filed by One Reporting Person			
SAN JOSE,	CA 05134							Form filed by M			
SAN JOSE,	CA 95154							Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction Date	e 2A. Deen	ned	3.	4. Securit	ties A	cquired	5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Year)	n Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) Day/Year) (Instr. 8)					Securities	Form: Direct			
(Instr. 3)							-	(D) or Indirect (I)	Beneficial Ownership		
		(		(				Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported Transaction(s)			
				<u> </u>		or	р.	(Instr. 3 and 4)			
Common				Code V	Amount	(D)	Price \$				
Stock	08/17/2015			S <u>(1)</u>	1,136	D	ф 28.53	156,250	D		
Stork							20.00				

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. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed	;	ate	Amou Under Secur	le and ant of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans
				of (D) (Instr. 3,						(Instr
				4, and 5)						
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
BHATT PRAT 170 WEST TASMAN DRIVE SAN JOSE, CA 95134			SVP, Corp Controller & CAO				
Signatures							
/s/ Prat Bhatt by Evan Sloves, Attorney-in-Fact			08/19/2015				
**Signature of Reporting Person	n		Date				
Explanation of Ro	enon	2021					

## **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) This transaction was effected pursuant to a Rule 10b5-1 plan adopted by the reporting person on December 16, 2014.

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.