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Form 4	STEMS, INC.									
FORN	ЛЛ	STATES					ANGE C	OMMISSION	OMB	PROVAL 3235-0287
Check th if no lor subject to Section Form 4 Form 5 obligation may cor <i>See</i> Inst 1(b).	Ashingtor NGES IN SECUI 16(a) of ti Jtility Ho nvestmen	BENEF RITIES he Securi lding Cor	T ICI ties I npan	Number:January 3Expires:200Estimated averageburden hours perresponse0						
(Print or Type	Responses)									
	Address of Reporting ER MARK D	Person <u>*</u>	Symbol	er Name an) SYSTEI			8	5. Relationship of I Issuer		
(Last) 170 WEST	(First) (Middle) /E	3. Date of	of Earliest 7 Day/Year)				Director X Officer (give t below)		Owner r (specify
SAN JOSE	(Street) 5, CA 95134			endment, Donth/Day/Yea	-	al		6. Individual or Joi Applicable Line) _X_ Form filed by Ou Form filed by Mo Person	ne Reporting Pe	rson
(City)	(State)	(Zip)	Tal	ole I - Non-	Derivative	Secu	rities Acqu	uired, Disposed of,	or Beneficial	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deem Execution any (Month/D	Date, if	3. Transactio Code (Instr. 8) Code V	4. Securit or Dispos (Instr. 3, 4 Amount	ed of		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	11/18/2015			S	88,331	D	ф 26.8678 (<u>1)</u>	3 228,959	D	
Common Stock								125,400	Ι	By Mark Chandler Trust
Common Stock								400 (2)	Ι	By spouse
Common Stock								600 <u>(2)</u>	Ι	By Trust #1
								500 ⁽²⁾	T	

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Common Stock			By Trust #2
Common Stock	300 <u>(2)</u>	Ι	By Trust #3

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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Tit	le and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	onNumber	Expiration D	ate	Amo	unt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	/Year)	Unde	rlying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secu	rities	(Instr. 5)	Bene
	Derivative				Securities			(Instr	. 3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						``
					4, and 5)						
					.,						
									Amount		
						Date	Expiration		or		
						Exercisable	Date	Title	Number		
						Excicisable	Date		of		
				Code V	(A) (D)				Shares		
_											
Repo	r tina O	wners									

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
CHANDLER MARK D 170 WEST TASMAN DRIVE SAN JOSE, CA 95134			SVP, LglSrvs, GenCnsl & Secty					
Signatures								
/s/ Mark D. Chandler by Prat Br Attorney-in-Fact	natt,		11/19/2015					
**Signature of Reporting Pe	erson		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).

Represents a weighted average sales price per share. These shares were sold in multiple transactions at prices ranging from \$26.86 to
 (1) \$26.885. The reporting person has provided to the issuer, and undertakes to provide to the staff of the Commission or any security holder of the issuer, upon request, full information regarding the number of shares sold at each separate price within the range.

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(2) The reporting person disclaims beneficial ownership of these securities, and this report shall not be deemed an admission that the reporting person is the beneficial owner of such securities for purposes of Section 16 or for any other purpose.

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.