

# CISCO SYSTEMS, INC. Reported by CHRISTIE KATHERINE BLAIR

#### FORM 4

(Statement of Changes in Beneficial Ownership)

### Filed 09/17/14 for the Period Ending 09/15/14

Address 170 WEST TASMAN DR

SAN JOSE, CA 95134-1706

Telephone 4085264000

CIK 0000858877

Symbol CSCO

SIC Code 3576 - Computer Communications Equipment

Industry Communications Equipment

Sector Technology

Fiscal Year 07/28





[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

ON OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person *				2.										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
Christie Kathe	rine Bla	ir		$\mathbf{C}$	IS(	CO SYS	STEM	IS	S, INC	. [ CS	C	<b>O</b> ]					
(Last) (First) (Middle)				3.	3. Date of Earliest Transaction (MM/DD/YYYY)								Director				
170 WEST TASMAN DRIVE					0/15/2014								below)	X Officer (give title below) Other (specify below)  SVP, Chief Marketing Officer			
	(Street)					mendme D/YYYY)	ent, Dat	te	Origina	l Filed			6. Individual	or Joint/0	Group Fili	ng (Check A	Applicable
SAN JOSE, CA 95134 (City) (State) (Zip)														_ X _ Form filed by One Reporting Person Form filed by More than One Reporting Person			
		Tab	ole I - Noi	n-Deriv	vati	ve Secu	rities A	c	quired,	Dispos	sed	of, o	r Beneficially Ow	ned			
			2. Trans Date		2A. Deemed Execution Date, if	3. Trans. Code (Instr. 8)		or Disposed of (D)			d (A)		mount of Securities Beneficially Owned wing Reported Transaction(s) : 3 and 4)			7. Nature of Indirect Beneficial Ownership	
						any	Code	V	/ Amount	(A) or (D)	Prie	ce				Direct (D) or Indirect (I) (Instr. 4)	
Common Stock 9/1				9/15/20	)14		s		23908	D \$25	5.000	)1 <sup>(1)</sup>	314426			D	
7	Гable II - 1	Derivati	ive Secur	ities Bo	ene	ficially (	Owned	( (	e.g. , pu	ıts, call	ls, v	varra	ants, options, con	vertible	securities	)	
(Instr. 3) or Exercise Exec			Deemed Execution Date, if	4. Trans. Code (Instr. 8)	I	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			6. Date Exercisable and Expiration Date			Securit Derivat	and Amount of ies Underlying tive Security 3 and 4)	derlying Derivative curity Security		Ownership Form of Derivative	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)		ate xercisable	Expiration Date	on ,		amount or Number of hares		Reported Transaction (s) (Instr. 4)	(I) (Instr. 4)	

#### **Explanation of Responses:**

(1) Represents a weighted average sales price per share. These shares were sold in multiple transactions at prices ranging from \$25.00 to \$25.005. 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.

**Reporting Owners** 

reporting Owners									
Paparting Owner Name / Address	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
Christie Katherine Blair									
170 WEST TASMAN DRIVE			SVP, Chief Marketing Officer	·					
SAN JOSE, CA 95134									

#### **Signatures**

/s/ Katherine Blair Christie by Evan Sloves, Attorney-in-Fact 9/17/2014

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- \* 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.

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.