

# JUNIPER NETWORKS INC

# Reported by **DENHOLM ROBYN M**

## FORM 4

(Statement of Changes in Beneficial Ownership)

## Filed 02/19/14 for the Period Ending 02/15/14

Address 1133 INNOVATION WAY

SUNNYVALE, CA 94089

Telephone 4087452000

CIK 0001043604

Symbol JNPR

SIC Code 3576 - Computer Communications Equipment

Industry Communications Equipment

Sector Technology

Fiscal Year 12/31





[ ] 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

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#### 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. Issuer Name <b>and</b> Ticker or Trading Symbol							ng Symb		5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
DENHOLM ROBYN M					JUNIPER NETWORKS INC [ JNPR ]							C	Direct	or	_	10% O	wner
(Last)	(First)	(Mid	ldle)	3.								DD/YYYY	below)	XOfficer (give title below)Other (specify below)  Division EVP CFO & Ops			
1194 NORTH MATHILDA AVENUE					2/15/2014								Division	LVP CFC	o & Ops		
(Street)					4. If Amendment, Date Original Filed (MM/DD/YYYY)							ed		6. Individual or Joint/Group Filing (Check Applicable Line)			
SUNNYVALE, CA 94089 (City) (State) (Zip)														_ X _ Form filed by One Reporting Person Form filed by More than One Reporting Person			
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			2. Tra Date	ns.	2A. Deemed Execution Date, if	Code ((Instr. 8)		(A) (D)	4. Securities A (A) or Dispose (D) (Instr. 3, 4 and		ed of (	Owned Following Reported Transaction(s) (Instr. 3 and 4) Ownership of Inc Form: Direct (D) Ownership of Inc Benet		Beneficial Ownership			
						any	Code	e V	Amo		A) or D)	Price				or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock 2/3				2/15/	15/2014		M		1632	20.0	A	<b>\$0.0</b> (1)	40629		D		
Common Stock 2/2				2/15/	2/15/2014		F		<b>6152</b> (2		D	\$27.42	34477			D	
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																	
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans. Date			. D S . A D	Number of Derivative ecurities acquired (A) Disposed of (Instr. 3, 4 and (Instr. 3)	or (D)	0)								Direct (D) or Indirect (I) (Instr.	Beneficial
				Code	V (A	A) (D)	Da Exc	ite ercisa		Expirat Date	ion	Title	Amount or Number of Shares		Transaction (s) (Instr. 4)	4)	
RSU Award	\$0.0 <sup>(3)</sup>	2/15/2014		M		16320.0		(4)	14 2	2/15/20	016	Common Stock	16320	\$0.0	31680	D	

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

- (1) This is a full value award.
- (2) Represents shares withheld from the released share award for the payment of applicable income and payroll withholding taxes due on release.
- (3) Represents the per share price for the award.
- (4) Vests as to thirty-four percent on the one year anniversary of the grant date and thirty-three percent annually on the second anniversary and third anniversary.

**Reporting Owners** 

Reporting Owner Name / Address		Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
DENHOLM ROBYN M									

1194 NORTH MATHILDA AVENUE	
	Division EVP CFO & Ops
SUNNYVALE, CA 94089	- 1

**Signatures** 

By: Mitchell L. Gaynor: Attorney in Fact For: Robyn M. Denholm 2/19/2014

\*\* 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.