## Edgar Filing: Palo Alto Networks Inc - Form 4

Palo Alto N	etworks Inc											
Form 4												
August 24, 2	2016											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB APPROVAL				
. •	••• UNITE	D STATES					ANGE CO	OMMISSION	OMB	3235-0287		
Check th	nis box		vv a	shington	, D.C. 20	1549			Number:	January 31,		
if no longer				ICES IN	DENIEL			EDSUID OF	Expires:	2005		
subject to				NGES IN BENEFICIAL OWNE					Estimated average			
Section 16. Form 4 or									burden hours per response 0.5			
Form 5		ursuant to S	Section 1	16(a) of th	ne Securi	ties F	Exchange	Act of 1934,	response	0.5		
obligatio	ons Section 1						-	1935 or Section	l			
may con <i>See</i> Instr	unue.			nvestmen	•	-	•					
1(b).	uction	. ,			•	2						
(Print or Type	Responses)											
1 Name and	Address of Departir	na Dorson *				_		5 Deletionship of l	Domontin a Domo	an(a) to		
1. Name and Address of Reporting Person *2. IssuTomlinson SteffanSymbol				and i thank and i then of i that ang				5. Relationship of Reporting Person(s) to Issuer				
rommson												
<i></i>					-		•• ]	(Check	all applicable	)		
(Last)	(First)	(Middle)		of Earliest T	ransaction			D' (	100	0		
			nth/Day/Year) 22/2016				Director 10% Owner X_ Officer (give title Other (specify					
INC., 4401 GREAT AMERICA				2016				below) below)				
PKWY		uen						Chief F	inancial Office	er		
	(Street)		4 If Am	andmant D	ate Origin	1		6 Individual or Ioi	nt/Group Filin	a(Chook		
· · · · · · · · · · · · · · · · · · ·							6. Individual or Joint/Group Filing(Check Applicable Line)					
								_X_ Form filed by One Reporting Person				
SANTA CI	LARA, CA 9503	54					:	Form filed by Me Person	ore than One Rej	porting		
(City)	(State)	(Zip)			<b>.</b>	a			<b>D</b> <i>a</i> <b>i u</b>			
	. ,						_	ired, Disposed of,		-		
1.Title of	2. Transaction Da		1 、				• • •	5. Amount of Securities	6. Over anshin	7. Nature of		
Security (Instr. 3)	(Month/Day/Year	any	i Date, li	Transaction Disposed of (D) Code (Instr. 3, 4 and 5)				Beneficially	Ownership Form:	Indirect Beneficial		
(Month/Day			ay/Year)	(Instr. 8)	(		- /	Owned	Dwned Direct (D) Owned			
								Following	or Indirect	(Instr. 4)		
						(A)		Reported Transaction(s)	(I) (Instr. 4)			
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)	(			
Common					2,655		\$					
Stock	08/22/2016			S	(1)	D	ф 136.906	133,308	D			
20001					_		1001200					

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. 3. Transaction Date Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date, if any (Month/Day/Year)	TransactionNumber				7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code V		Date Exercisable	Expiration Date	Title	Amount or Number of Shares		
Repo	rting O	wners									
				Re	lationships	5					

<b>Reporting Owner Name / Address</b>	Relationships							
	Director	10% Owner	Officer	Other				
Tomlinson Steffan C/O PALO ALTO NETWORKS INC. 4401 GREAT AMERICA PKWY SANTA CLARA, CA 95054			Chief Financial Officer					
Signatures								
/s/ Jeff True, Attorney-in-Fact for Steffa Tomlinson	an	08	/24/2016					
<u>**</u> Signature of Reporting Person			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).

(1) Represents the number of shares automatically sold upon vesting of restricted stock units to cover tax withholding obligations.

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.

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