Edgar Filing: NETWORK APPLIANCE INC - Form 4

	X APPLIANCE IN	IC								
Form 4 August 21, 2	2006									
	_								OMB AP	PROVAL
FORM	/1 4 UNITED	STATES		RITIES A			NGE CO	MMISSION	OMB Number:	3235-0287
Check the					,				Expires:	January 31,
if no lon subject t Section Form 4 Form 5	AENT OF		SECUI	Expires: 2009 Estimated average burden hours per response 0.9						
obligation may cor <i>See</i> Instr 1(b).	ons Section 17(a) of the H	Public U	tility Hol	lding Cor	npan	•	Act of 1934, 935 or Section		
(Print or Type	Responses)									
1. Name and A VALENTI					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
			[NTAP	-					••	
((Month/Dav/Year) —				_X Director 10% Owner Officer (give title Other (specify below) below)			
				iled(Month/Day/Year) Aj				 Individual or Joint/Group Filing(Check Applicable Line) X_ Form filed by One Reporting Person Form filed by More than One Reporting 		
MENLO P.	ARK, CA 94025						P	Form filed by Mo erson	ore than One Rep	porting
(City)	(State)	(Zip)	Tab	le I - Non-	Derivative	Secu	rities Acqui	red, Disposed of,	or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	Transactionor Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or		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	08/18/2006			Code V M	Amount 96,000	(D) A	Price \$ 1.969	96,000	Ι	by Trust1 (1)
Common Stock	08/18/2006			S	96,000	D	\$ 33.0856 (2)	0	I	by Trust1
Common Stock							_	500,000	Ι	by Trust (1)

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)

Edgar Filing: NETWORK APPLIANCE INC - Form 4

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. Number of onDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amour Underlying Securit (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amo or Num of Sh
Non-Qualified Stock Option (right to buy)	\$ 1.969	08/18/2006		М	96,000	(3)	10/22/2006	Common Stock	96,(

Reporting Owners

Reporting Owner Name / Address	Relationships					
L O	Director	10% Owner	Officer	Other		
VALENTINE DONALD T SEQUOIA CAPITAL 3000 SAND HILL ROAD MENLO PARK, CA 94025	Х					

Signatures

By: Janice Mahoney by Power of Attorney For: Donald T. Valentine

**Signature of Reporting Person

08/18/2006

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) Shares held in trust by Donald T. Valentine, trustee to the Donald T. Valentine Family Trust DTD 4/29/67
- (2) The sale prices for the reported transaction were in a range of \$33.00 to \$33.20 per share.

Option is immediately exercisable, but any shares purchased under the option will be subject to repurchase by the Company at the option exercise price paid per share, upon the Optionee's cessation of Board service prior to vesting in those shares. The shares will vest upon the

(3) Exercise price paid per share, upon the Optionee's cessation of Board service prior to vesting in mose shares. The shares will vest upon the Optionee's continuation in Board service through the day immediately preceding the next Annual Stockholders Meeting following the grant date.

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.