## Edgar Filing: Kilguss George E III - Form 4

Kilguss Geor	ge E III										
Form 4											
July 21, 2017	7										
FORM 4 LINITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB AF	OMB APPROVAL		
<b>UNITED STATES SECURITIES AND EXCHANGE COMMISSION</b> Washington, D.C. 20549								OMB Number:	3235-0287		
Check this box									Expires:	January 31,	
if no longer subject to STATEMENT OF CHAN				GES IN BENEFICIAL OWNE				NERSHIP OF	Estimated a	2005 Verage	
Section 1		SECURITI						burden hours per			
Form 4 o Form 5									response 0.		
obligation	<b>1</b> 0						-	e Act of 1934,			
may cont				•	•	- ·		1935 or Section	1		
See Instru	iction	30(h) of t		sument	Compan	y Ac	t 01 194	0			
1(b).											
(Print or Type F	Responses)										
1. Name and Address of Reporting Person <sup>*</sup> _ 2. Issuer Name and					Ticker or Trading 5. Relationship of			Reporting Pers	on(s) to		
Kilguss Geo	rge E III	Syı	mbol					Issuer			
VERISI			ERISIGN	SIGN INC/CA [VRSN]				(Check all applicable)			
(Last)	(First) (Middle) 3. Date of E			Earliest Transaction				(check un applicable)			
12061 BLUEMONT WAY         (Month/D)			onth/Day/	-				Director		Owner	
			/20/2017					XOfficer (give titleOther (specify below) below)			
								ĒV	/P and CFO		
	(Street)	4. I	If Amendr	ndment, Date Original				6. Individual or Joint/Group Filing(Check			
			ed(Month/I	nth/Day/Year)				Applicable Line)			
								_X_ Form filed by C Form filed by M			
RESTON, V	/A 20190							Person		porting	
(City)	(State)	(Zip)	Table I	- Non-De	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction Date	13.4. Securities Acquired					5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year)	Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)					Securities	Form: Direct			
(Instr. 3)		any (Month/Day/Year)				4 and	5)	2	· /	Beneficial Ownership	
		(Woldin Duy)	(II)	nstr. 8)				Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported			
						or		Transaction(s) (Instr. 3 and 4)			
G			C	ode V	Amount	(D)	Price	(msu. 5 and 4)			
Common	07/20/2017		F	r(1)	196	D	\$	146,756	D		
Stock							98.84				

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. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transact Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	7. Title Amoun Underly Securiti (Instr. 3	t of /ing es	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	o Title N o	Number		

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## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Kilguss George E III 12061 BLUEMONT WAY RESTON, VA 20190			EVP and CFO				
Signatures							
Thomas C. Indelicarto, Attorney-in-Fact		07/21/2	2017				
<u>**</u> Signature of Reporting Person		Date					
Evalenation of De	~ <b>~</b> ~ <b>~</b>						

## **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) Disposition of shares exempt under Rule 16b-3 as payment of tax liability to Company by delivery or withholding securities incident to vesting of restricted stock units.

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.