

CISCO SYSTEMS, INC.

Reported by MARTINEZ MARIA

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 09/20/19 for the Period Ending 09/18/19

Address 170 WEST TASMAN DR

SAN JOSE, CA, 95134-1706

Telephone 4085264000

CIK 0000858877

Symbol CSCO

SIC Code 3576 - Computer Communications Equipment

Industry Communications & Networking

Sector Technology

Fiscal Year 07/27



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 and Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer					
Martinez M	aria			C	ISC	O SYS	STEMS,	, IN	C. [(CSCO]		(Check all appl	licable)				
(Last) (First) (Middle)				3.	3. Date of Earliest Transaction (MM/DD/YYYY)								Director					
(2006) (Finale)												X Officer (give title below) Other (specify below)						
170 WEST TASMAN DRIVE						9/18/2019								EVP, Chief Customer Exp Offcr				
(Street)					4. If Amendment, Date Original Filed (MM/DD/YYYY)							6. Individual or Joint/Group Filing (Check Applicable Line)						
SAN JOSE, CA 95134												_X _ Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City) (State) (Zip)					Form theo by More than One Reporting Person													
			Table I -	Non-De	rivati	ive Seci	ırities Ac	quir	ed, Dis	posed o	of, or	Be	eneficially Owne	d				
1. Title of Security (Instr. 3) 2. Trans. D				Trans. Date	ate 2A. Deemed Execution Date, if any		3. Trans. Co (Instr. 8)	ode	4. Securities Acquired (or Disposed of (D) (Instr. 3, 4 and 5)			ĺ	5. Amount of Securitic Following Reported T (Instr. 3 and 4)	ties Beneficially Owned Transaction(s)		Ownership Form:	7. Nature of Indirect Beneficial Ownership	
							Code	V	Amou	(A) o		ice					(Instr. 4)	
Common Stock 9/18/201				9/18/2019	A 44192 (1) A \$0 215627			D										
Common Stock													1276			I	by Trust	
	Tab	ole II - De	rivative S	ecurities	Bene	eficially	Owned (e.g.,	puts,	calls, wa	ırran	ıts,	, options, convert	tible secu	urities)			
	2. Conversion or Exercise Price of Derivative Security	3. Trans. Date	3A. Deeme Execution Date, if any	(Instr. 8)	ns. Code 8. Derivativ Acquired Disposed (Instr. 3,		ve Securities Ext (A) or d of (D)					ritie ⁄ativ	es Underlying I ve Security S	Derivative Security	Securities Beneficially Owned	Ownership Form of Derivative Security:	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exer	cisable	Expiration Date	Title		mount or Number of nares		Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)		

Explanation of Responses:

(1) Represents a restricted stock unit award that vests in installments, with twenty-five percent (25%) of the shares vesting on November 10, 2020 and six-andone-quarter percent (6.25%) of the shares vesting quarterly thereafter.

Reporting Owners

Penarting Owner Name / Address	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
Martinez Maria									
170 WEST TASMAN DRIVE			EVP, Chief Customer Exp Offcr						
SAN JOSE, CA 95134									

Signatures

/s/ Maria Martinez by Evan Sloves, Attorney-in-Fact 9/20/2019 Date **Signature of Reporting Person

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).

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.