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JUNIPER N Form 4	ETWORKS INC										
March 22, 20									OMB AF	PROVAL	
FORM	14 UNITED S	STATES S					NGE C	OMMISSION	OMB Number:	3235-0287	
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. STATEMENT OF CHAI Filed pursuant to Section Section 17(a) of the Public U				 Ashington, D.C. 20549 NGES IN BENEFICIAL OWNERSHIP (SECURITIES 16(a) of the Securities Exchange Act of 193 Utility Holding Company Act of 1935 or Securities Securities (Securities Securities) 					Expires: January 31 2005 Estimated average burden hours per response 0.5		
(Print or Type]	Responses)										
SINDHU PRADEEP Symbol JUNIPE			r Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer				
				PER NETWORKS INC [JNPR]				(Check all applicable)			
(Montl				ite of Earliest Transaction hth/Day/Year) 10/2017				X Director Officer (give below)	ector 10% Owner cer (give title Other (specify below)		
				endment, Date Original onth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting			
(City)		(Zip)	Tabl	e I - Non-I	Derivative S	Securi	ties Aca	Person uired, Disposed of	. or Beneficiall	v Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Transaction Date 2A. Deemed			4. Securiti on(A) or Dis (Instr. 3, 4	ies Ac sposed	quired of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
Common				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Stock	03/20/2017			М	10,569	А	\$0	51,342	D		
Common Stock	03/20/2017			F <u>(1)</u>	5,515	D	\$ 28.18	45,827	D		
Common Stock	03/20/2017			G <u>(2)</u>	5,054	D	\$0	40,773	D		
Common Stock	03/20/2017			G <u>(2)</u>	5,054	А	\$0	2,054,841	I	by Family Trust	
Common Stock								585,000	I	Bertrand 2016 GRAT	

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Common Stock Common Stock						585,000 863,476	I	Sindhu 2016 GRAT by Family LP	
Reminder: F	Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.								
				inform require	nation containe ed to respond ys a currently	nd to the collect ed in this form a unless the form valid OMB cont	are not n	CC 1474 (9-02)	
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. Transactic Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date7. Title and Am- Underlying Secu (Instr. 3 and 4)			Securities
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Share
RSU Award	\$ 0	03/20/2017		М	10,569	03/20/2016 <u>(3)</u>	03/20/2018	3 Common Stock	10,569

Reporting Owners

Reporting Owner Name / Address		Kelationsh		
	Director	10% Owner	Officer	Other
SINDHU PRADEEP 1133 INNOVATION WAY SUNNYVALE, CA 94089	Х			
Signatures				
By: Robert Mobassaly: Attorne	03/22/2017			
**Signature of Repo		Date		

Relationshins

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 shares withheld from the released share award for the payment of applicable income and payroll withholding taxes due on release.

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- (2) Represents the transfer of shares to the Sindhu Family Trust from the reporting person immediately upon vesting of the Restricted Stock Unit.
- (3) This awards vests from the original grant date 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.
- (4) Column 8 is not an applicable reportable field.

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.