## Edgar Filing: ADOBE SYSTEMS INC - Form 4

| ADOBE SY   | STEMS INC   |  |                   |   |   |                  |  |  |   |   |  |
|--|---|--|-------------------|---|---|------------------|--|--|---|---|--|
| Form 4   |   |  |                   |   |   |                  |  |  |   |   |  |
| September 1  | 9, 2014   |  |                   |   |   |                  |  |  |   |   |  |
| FORM   | FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSIO                                      |  |                   |   |   |                  |  | 01 <b>11 11 1 1 1</b>  | OMB APPROVAL  |   |  |
|  | Washington, D.C. 20549  |  |                   |   |   |                  | OMMISSION  | OMB<br>Number:   | 3235-0287   |   |  |
| Check this box<br>if no longer                                   |   |  |                   |   |   |                  |  |  | Expires:  | January 31,<br>2005   |  |
| subject to STATEMENT OF CHAN<br>Section 16.                      |   |  |                   | NGES IN BENEFICIAL OWNERSHIP OF<br>SECURITIES |   |                  |  |  | Estimated average burden hours per                                      |   |  |
| Form 4 c<br>Form 5   | Form 4 or<br>Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, |  |                   |   |   | A at af 1024     | response 0.5                                     |  |   |   |  |
| obligatio  | -   |  |                   |   |   |                  | -  | 1935 or Section  |   |   |  |
| may con<br>See Instr   | unue.   |  |                   | ivestment                                     | •   | · ·              | •  |  | L   |   |  |
| 1(b).  |   |  |                   |   |   |                  |  |  |   |   |  |
| (Print or Type ]   | Responses)  |  |                   |   |   |                  |  |  |   |   |  |
| 1. Name and Address of Reporting Person _2. IssueBanse AmySymbol |   |  | r Name <b>and</b> | I Ticker or                                   | Tradi   | ng               | 5. Relationship of Reporting Person(s) to Issuer |  |   |   |  |
|  |   |  | ADOBI             | E SYSTE                                       | MS INC  | [AD              | BE]  | (Chaol   | all applicable  | <b>`</b>  |  |
| (Last)   | (First) (M  | Middle)                                  | 3. Date of        | f Earliest Ti                                 | ransaction  |                  |  | (Check   | an applicable   | )   |  |
| (Month/D   |   |  | Day/Year)         |   |   |                  | X Director 10% Owner                             |  |   |   |  |
| ADOBE SYSTEMS 09/19/2  |   |  | -                 |   |   |                  | Officer (give title Other (specify below) below) |  |   |   |  |
| INCORPOI<br>AVENUE   | RATED, 345 PAR  | RK                                       |                   |   |   |                  |  | 5010 w)  | below)  |   |  |
|  | (Street)  | (Street)                                 |                   | 4. If Amendment, Date Original                |   |                  |  | 6. Individual or Joint/Group Filing(Check                                    |   |   |  |
|  |   |  | nth/Day/Yea       | r)  |   |                  | Applicable Line)                                 |  |   |   |  |
| SAN JOSE,  | , CA 95110  |  |                   |   |   |                  |  | _X_ Form filed by O<br>Form filed by M<br>Person                             |   |   |  |
| (City)   | (State)   | (Zip)                                    | Tab               | le I - Non-I                                  | Derivative  | Secur            | ities Acqu                                       | uired, Disposed of,  | or Beneficial   | ly Owned  |  |
| 1.Title of<br>Security<br>(Instr. 3)                             | 2. Transaction Date<br>(Month/Day/Year)   | 2A. Deem<br>Execution<br>any<br>(Month/D | Date, if          | 3.<br>Transactic<br>Code<br>(Instr. 8)        | Transactior(A) or Disposed of (D)<br>Code (Instr. 3, 4 and 5) |                  |  | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported | 6.<br>Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4) | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
|  |   |  |                   | Code V  | Amount  | (A)<br>or<br>(D) | Price  | Transaction(s)<br>(Instr. 3 and 4)   | (11041.1)   |   |  |
| Common<br>Stock  | 09/19/2014  |  |                   | Р   | 1,740   | A                | \$<br>66.449                                     | 20,379   | D   |   |  |

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<br>Derivative<br>Security<br>(Instr. 3) | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transacti<br>Code<br>(Instr. 8) | Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3, |                     |                    | 7. Title and<br>Amount of<br>Underlying<br>Securities<br>(Instr. 3 and 4) |  | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secur<br>Bene<br>Owne<br>Follo<br>Repo<br>Trans<br>(Instr |
|---|---|---|---------------------------------------|--|---------------------|--------------------|---|--|---|---|
|   |   |   | Code V                                | 4, and 5)<br>(A) (D)   | Date<br>Exercisable | Expiration<br>Date | Title   | Amount<br>or<br>Number<br>of<br>Shares |   |   |

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## **Reporting Owners**

Reporting Owner Name / AddressDirector10% OwnerOfficerOtherBanse Amy<br/>ADOBE SYSTEMS INCORPORATED<br/>345 PARK AVENUE<br/>SAN JOSE, CA 95110XXXXSignaturess<br/>attorney-in-fact09/19/2014XXX

## **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).

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.