

Edgar Filing: F5 NETWORKS INC - Form 5

F5 NETWORKS INC
Form 5
December 03, 2001

FORM 5

OMB APPR

OMB NUMBER:
EXPIRES: DECEMBER
ESTIMATED AVERAGE
HOURS PER RESPONSE

[] CHECK THIS BOX IF NO LONGER SUBJECT TO SECTION 16. FORM 4 OR FORM 5 OBLIGATIONS MAY CONTINUE. SEE INSTRUCTION 1(b)

[] FORM 3 HOLDINGS REPORTED

[X] FORM 4 TRANSACTIONS REPORTED

UNITED STATES SECURITIES AND EXCHANGE COMMISSION
WASHINGTON, D.C. 20549

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,
Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(f) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*			2. Issuer Name and Ticker or Trading Symbol		6. R
GRINSTEIN, KEITH			F5 NETWORKS, INC. (ffiv)		t
(Last)	(First)	(Middle)	3. IRS or Identification Number of Reporting Person, if an entity (Voluntary)		4. Statement for Month/Year
c/o F5 NETWORKS, INC.					September 30, 2001
401 ELLIOTT AVENUE WEST					
(Street)					5. If Amendment, Date of Original (Month/Year)
SEATTLE, WA 98119					
(City)	(State)	(Zip)			7. I

TABLE I -- NON-DERIVATIVE SECURITIES ACQUIRED, DISPOSED OF, OR BENEFICIAL

1. Title of Security (Instr. 3)	2. Trans- action Date (Month/ Day/ Year)	3. Transac- tion Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount o curities cially O end of I Fiscal Y (Instr.
			Amount (A) or (D) Price	

[illegible]

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 CONTROL NUMBER.

TABLE II -- DERIVATIVE SECURITIES ACQUIRED, DISPOSED OF, OR BENEFICIAL
(E.G., PUTS, CALLS, WARRANTS, OPTIONS, CONVERTIBLE SECURITIES)

[illegible]

11. Nature of Indirect Beneficial Ownership

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Owned at End
of Year
(Instr. 4)

or Indirect (I)
(Instr. 4)

(Instr. 4)

5,000

D

Explanation of Responses:

**Intentional misstatements or omissions of facts constitute Federal Criminal Violations.
See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

/s/ K

**Sig

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.