Edgar Filing: SYMANTEC CORP - Form 4

SYMANTEC	CORP										
Form 4											
May 13, 200	8										
FORM										PPROVAL	
	UNITH	ED STATE			AND EX , D.C. 20		NGE (COMMISSION	OMB Number:	3235-0287	
Check thi				0	·				Expires:	January 31,	
if no long subject to		EMENT C	OF CHAN	GES IN BENEFICIAL OW				NERSHIP OF		2005	
Section 1	5				RITIES				Estimated average burden hours per		
Form 4 or	Form 4 or								response	•	
Form 5	Filed	pursuant to	Section 1	6(a) of the	ne Securi	ties E	xchang	ge Act of 1934,			
obligation may cont	Nection	17(a) of the	Public Ut	ility Hol	ding Co	npan	y Act o	f 1935 or Sectio	n		
See Instru 1(b).		30(h) of the In	vestmen	t Compa	ny Ac	t of 194	40			
(Print or Type R	Responses)										
1. Name and Address of Reporting Person _ 2. Issue CHAFFIN JANICE Symbol				uer Name and Ticker or Trading I				5. Relationship of Reporting Person(s) to Issuer			
S			SYMAN	NTEC C	ORP [SY	MC]		(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of	Earliest T	ransaction			(Chief	in an approach	-)	
			(Month/D	nth/Day/Year)				Director		6 Owner	
	ENS CREEP	K	05/09/2	008				XOfficer (give below)	e title Oth below)	er (specify	
BOULEVA	RD							· · · · · · · · · · · · · · · · · · ·	s.,Consumer Bu	ıs. Unit	
	(Street)		4. If Ame	ndment, D	ate Origina	1		6. Individual or Jo	oint/Group Filin	ng(Check	
				led(Month/Day/Year)				Applicable Line)			
CUPERTIN	O, CA 95014							_X_ Form filed by 0 Form filed by M Person	One Reporting Po More than One Ro		
(City)	(State)	(Zip)									
(City)	(State)	(Zip)	Tabl	e I - Non-J	Derivative	Secur	ities Aco	quired, Disposed of	f, or Beneficial	lly Owned	
1.Title of	2. Transaction		1					7. Nature of			
Security (Instr. 3)	(Month/Day/Year) Exec any		tion Date, if Transaction(A) or Disposed Code (D)					Form: Direct (D) or	Indirect Beneficial		
(Instr. 5)		-	/Day/Year)	Code (D) (Instr. 8) (Instr. 3, 4 and 5)				, , , , , , , , , , , , , , , , , , ,	· /	Ownership	
			•					Following	(Instr. 4)	(Instr. 4)	
						(A)	Reported Transaction(s)			
						or		(Instr. 3 and 4)			
Comment				Code V) Price	(
Common Stock	05/09/2008			А	30,000 (1)	A	\$0	170,411	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)

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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 Date (Month/Day/Year)		7. Title and Amour Underlying Securit (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amo or Num of Sh
Non-Qualified Stock Option (right to buy)	\$ 19.99	05/09/2008		А	90,000	(2)	05/09/2015	Common Stock	90,0

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner		Other			
CHAFFIN JANICE 20330 STEVENS CREEK BOULEVARD CUPERTINO, CA 95014			Group Pres., Consumer Bus. Unit				
Signatures							
/s/ Greg King, as attorney-in-fact for Janice Chaffin		05/13/2	008				

<u>**Signature of Reporting Person</u>

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 that are issuable pursuant to restricted stock units. 1/3 of the restricted stock units will vest on each of June 1, 2009, June 1, 2010 and June 1, 2011.

Date

(2) 25% will vest on 1st anniversary measured from May 9, 2008 and the remainder will vest in equal monthly installments over the next 36 months.

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.