Check

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Check this box if no longer subject |
|-------------------------------------|
| to Section 16. Form 4 or Form 5 |
| obligations may continue. See |
| Instruction 1(b). |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

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* BIDZOS D JAMES | | | | | | 2. Issuer Name and Ticker or Trading Symbol VERISIGN INC/CA [VRSN] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|--|--|--|--------|-----------------------------------|------|---|------------|---|---|------------------------------|--------------------|---|--------------------------------------|--|---|--|---------------|--|--|
| | | | | | | 11101 | <u>UII</u> | 1110 | 7 021 | _ , | J. 1 | | | X | Direc | tor | | 10% O | wner |
| (Last) (First) (Middle) 12061 BLUEMONT WAY | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/15/2020 | | | | | | | | X | Office | er (give title v) | | Other (s | specify |
| | | | | | | | | | | | | | | Exec. Chairman & CEO | | | | | |
| (Street) | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) 05/18/2020 | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| RESTON VA 20190 | | | | | | 00/10/2020 | | | | | | | | | X Form filed by One Reporting Person | | | | |
| (City) | (St | ate) (2 | Zip) | | | | | | | | | | | | Form filed by More than One Reporting Person | | | | orting |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day) | | | | | | Execution Date | | | 3. Transaction Code (Instr. 8) 4. Securities Disposed Of 5) | | | | | | 5. Amo Securit Benefic Owned Report | ties cially I Following | Form (D) o | n: Direct r Indirect istr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | | | v | Amount | (A) o (D) | r Price | е | Transaction(s) (Instr. 3 and 4) | | | | (111501.4) |
| Common Stock 05/15/20 | | | | | |)20 | | | F ⁽¹⁾ | | 2,071(2) | D | \$21 | 7.25 | .25 916,274 | | | D | |
| | 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) | if any | emed tion Date, n/Day/Year) | | Transaction Code (Instr. | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | e Exerc tion D n/Day/` | | 7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4) | | Der Sed (Ins | Price of rivative curity str. 5) | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | y | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exerci | sable | Expiration Date | Title | Amoun or Numbe of Shares | r | | | | | |

Explanation of Responses:

- 1. Disposition of shares exempt under Rule 16b-3 as payment of tax liability to Company by delivery or withholding securities incident to vesting of restricted stock units.
- 2. Due to an administrative error, the original Form 4 timely filed on May 18, 2020 reporting the exempt disposition of shares as payment of tax liability to Company by delivery or withholding securities incident to vesting of restricted stock units reported the number of shares disposed as 2,130, and the correct amount is 2,071.

Remarks:

Thomas C. Indelicarto, Attorney in Fact for D. James 03/29/2021 **Bidzos**

** Signature of Reporting Person Date

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).

Note: 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 Number.