FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPROVAL										
l	OMB Number:	3235-028									

87 Estimated average burden hours per response: 0.5

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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1. Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
MOORE ROGER H/CA					1	VERISIGN INC/CA [VRSN]							Ι,	X	Direc	,	10%	Owner			
,																Officer (give title		Othe	r (specify		
(Last)	(Fi	rst) (I	Middle)			3. Date of Earliest Transaction (Month/Day/Year)									belov		belo				
487 EAST MIDDLEFIELD ROAD					08/	08/03/2009															
107 EAGT MIDDED IDED ROTE																					
(044)						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable						
(Street) MOUNT	A INI															Line) X Form filed by One Reporting Person					
VIEW	CA CA	A 9	4043												X						
VIEW													Form filed by More than One Reporting Person								
, au ,			-																		
(City)	(St	ate) (2	Zip)																		
		Tabl	e I - Nor	n-Deriv	ative	Se	curitie	s Acc	uired,	Dis	posed o	f, or	Bene	eficia	ally (Owne	ed				
1. Title of S	ecurity (Inst	r. 3)		2. Trans	action				3.								ount of	6. Ownership	7. Nature		
				Date (Month/	Day/Yea	Execution Date, ay/Year) if any		Code (Transaction Disposed Of (D) (Instr. 5)			3, 4 a	Ben		cially	Form: Direct (D) or Indirect					
						(Month/Day/Year)		8)					Owned Fo Reported		l Following ted	(I) (Instr. 4)	Ownership (Instr. 4)				
									Code	v	Amount		(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)			, ,		
									-			- ` ' - -			<u> </u> `						
Common Stock 08/03/					/2009				A		9,666 ⁽¹⁾ A		A	\$	0	23,769		D			
		Ta	hle II - [Derivat	ive S	ecu	rities	Δcaui	red Di	isno	sed of,	or B	enefi	ciall	v Ov	vned					
											onvertib				,	····ou					
1. Title of	2.	3. Transaction	3A. Deemed Execution Dat if any (Month/Day/Ye		4.				6. Date Exercisab				7. Title and			ice of 9. Number of			11. Nature		
Derivative Security	Conversion or Exercise Price of Derivative	Date (Month/Day/Year)		Date,	Date, Transa Code (I				Expiration (Month/D			Amount of Securities			Derivative Security		derivative Securities	Ownership Form:	of Indirect Beneficial		
(Instr. 3)				y/Year)	Year) 8)		Securities		•	Unde	Underlying Derivative Security (Instr.			r. 5)	Beneficially Owned Following	Direct (D)	Ownership (Instr. 4)				
	Security							Acquired (A) or								(I) (Instr. 4					
						Disposed of (D) (Instr. 3, 4 and 5)						and 4)				Reported Transaction(s)	(s)				
																(Instr. 4)	``				
			ŀ			and 3	,					T	4								
													or	ount							
								,	Date	_ [,	Expiration		Nun	nber							
					Code	v	(A)		Exercisal		Date	Title		res							

Explanation of Responses:

1. On 08/03/2009, Reporting Person was awarded restricted stock units (RSUs). Each RSU represents a contingent right to receive one (1) share of VeriSign common stock once vested. The grant vests quarterly from the date of grant over one year, subject to applicable taxes upon delivery.

> By: Luci Altman, as attorneyin-fact For: Roger H. Moore

08/05/2009

** 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.