FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D	D.C. 20549
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STATEMENT	OF CH	ANGES	IN BEN	EFICIAL	OWNER	SHIP

OMB APPROVAL OMB Number: 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

1. Name and Address of Reporting Person* <u>COTE KATHLEEN A</u>					2. Issuer Name and Ticker or Trading Symbol VERISIGN INC/CA [VRSN]								ck all app	,		s) to Is 10% O			
(Last) 12061 BI	Last) (First) (Middle) 12061 BLUEMONT WAY					3. Date of Earliest Transaction (Month/Day/Year) 07/27/2012									Officer (give title below)		Other (specify below)		
(Street) RESTON (City)			20190 Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Inc Line)	Forn	or Joint/Group Filing (Check Applicable rm filed by One Reporting Person rm filed by More than One Reporting rson					
		Tabl	e I - No	n-Deriv	ative	Sec	curitie	s Ac	quired,	Dis	posed o	f, or E	Bene	ficially	Own	ed			
1. Title of Security (Instr. 3) 2. Transa Date (Month/L				Execution Date,			3. 4. Securitie Disposed C 5)					Secur Benef	icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	(A) (D)	or	Price	Transa	action(s) 3 and 4)			(111511.4)
Common Stock 07/27			/2012	2012		S		1,110(1	1) D \$		\$42.94	18,635.8172		D					
		Та									sed of, onvertib				wned				
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Year) if any (Month/Day/		n Date,	4. Transaction Code (Instr. 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		tr. 3	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
					Code	v	(A)	(D)	Date Exercisa	ble	Expiration Date	Title	of Shar						

Explanation of Responses:

1. The transactions reported on this Form 4 were executed under the Reporting Person's Rule 10b5-1 Plan.

By: Luci Altman, as Attorney in Fact For: Kathleen A. Cote

07/30/2012

** 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.