FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
	OMB Number:	3235-0287								
l	Estimated average burden									
l	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* GOSHORN RICHARD H							2. Issuer Name and Ticker or Trading Symbol VERISIGN INC/CA [VRSN]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify					
(Last) (First) (Middle) 487 EAST MIDDLEFIELD ROAD							3. Date of Earliest Transaction (Month/Day/Year) 02/23/2009							X Office (give title of the spect below) SVP, GC and Secretary						
(Street) MOUNTAIN VIEW CA 94043					4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City) (State) (Zip)																				
		Tal	ole I - Nor	ո-Deri	ivativ	e Se	curitie	s Ac	quired, I	Disp	osed o	f, or Bei	neficiall	y Owned						
Date					nsactior h/Day/Yo	action 2A. Deemed Execution Date, if any (Month/Day/Year)			Code (Ir	Transaction Disposed Of (D) (Instr. 3, 4)				5. Amou Securitie Beneficie Owned F Reported	ally following	Form (D) o	: Direct I r Indirect I str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D) Price		Transaction(s) (Instr. 3 and 4)				msu. 4)		
Common Stock 02/23/						/2009		A		13,000 ⁽¹⁾ A		\$0	68,	68,910		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)	3A. Deemed Execution D if any (Month/Day	ate,	Code (Ins		on of		6. Date Exercisabl Expiration Date (Month/Day/Year)		of Securities		ies g Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	i is illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	Amount or Number of Shares							
Non- Qualified Stock Option (right to buy)	\$18.64	02/23/2009			A		32,500		02/23/2010 ⁽	(2))2/23/2016	Common Stock	32,500	\$0	32,500	0	D			

Explanation of Responses:

- 1. On 02/23/2009, 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. Twenty-five percent (25%) of the grant vests on the first anniversary of the date of grant and thereafter as to twenty-five percent (25%) of the granted RSU on each subsequent annual anniversary date of the date of grant, subject to necessary withholding for applicable taxes.
- 2. Twenty-five percent (25%) of the total options granted vest and become exercisable on the first anniversary of the date of grant and thereafter with respect to 6.25% of the shares each quarterly anniversary of the date of grant until fully vested.

By: Luci Altman, as attorneyin-fact For: Richard H. Goshorn

02/25/2009

** 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.