Edgar Filing: LEVY RICHARD M - Form 4

Form 4	HARD M											
September	17, 2008											
FORM	$\mathbf{\Lambda} 4_{\text{UNITED}}$	STATES	SECU	RITIF	S A	AND EX	сна	NGE CO	MMISSION		PROVAL	
		STATES				, D.C. 20				OMB Number:	3235-0287	
Check t if no lor subject Section Form 4 Form 5	nger to 16. or Filed pu	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,									January 31, 2005 verage s per 0.5	
obligati may con <i>See</i> Inst 1(b).	ntinue. Section 176 ruction			•		•	· ·	y Act of 1 et of 1940	935 or Section			
(Print or Type	Responses)											
LEVY RICHARD M Sym VA									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
	AN MEDICAL 5, 3100 HANSEN	Middle) WAY,	3. Date of (Month/ 09/15/2	Day/Ye		ransaction		_	_X Director Officer (give ti elow)		Owner r (specify	
				Ionth/Day/Year) A					5. Individual or Joint/Group Filing(Check Applicable Line) X_ Form filed by One Reporting Person			
PALO AL	ГО, СА 94304-10)30						P	Form filed by Mo erson	ore than One Rej	porting	
(City)	(State)	(Zip)	Tab	ole I - N	on-	Derivative	Secur	ities Acqui	red, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if Transactionor Disposed of (D) Secu Code (Instr. 3, 4 and 5) Bena ay/Year) (Instr. 8) Own Folla (A) Tran					5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	nount of 6. 7. Nature of ities Ownership Indirect ficially Form: Beneficial ed Direct (D) Ownership wing or Indirect (Instr. 4) rted (I)			
				Code	V	Amount	(D)	Price	(Instr. 3 and 4)			
Common Stock	09/15/2008			М		30,000	А	\$ 13.9531	30,000	D		
Common Stock	09/15/2008			S		9,000	D	\$ 61.8517	21,000	D		
Common Stock	09/15/2008			S		21,000	D	\$ 62.3171	0	D		
Common Stock	09/15/2008			G	V	5,000	D	\$ 0	219,907	I	By Trust	

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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)

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. Transactio 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 Amoun Underlying Securiti (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amou or Numb of Sha
Non-qualified Stock Option (Right to Buy)	\$ 13.9531	09/15/2008		М	30,000	<u>(1)</u>	11/17/2010	Common Stock	30,0

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
LEVY RICHARD M C/O VARIAN MEDICAL SYSTEMS 3100 HANSEN WAY, MAIL STOP E-327 PALO ALTO, CA 94304-1030	Х					
Signatures						
/s/ Franco N. Palomba, Attorney in Fact for Levy	09/17/2008					
**Signature of Reporting Person	Date					

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) Stock option granted under the Varian Medical Systems, Inc. Omnibus Stock Plan, which complies with Rule 16b-3. The option vests as follows: one third on 11/17/01, and the remaining shares in 24 equal installments over the 24 months following the first vesting date.

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.