Edgar Filing: WHITAKER ERIC S - Form 4

| WHITAKE | R ERIC S | | | | | | | | | | |
|---|--|-------------------|---|--|--|--------------------------|---|--|---|---|--|
| Form 4 | 6 2011 | | | | | | | | | | |
| November 1 | | | | | | | | | | | |
| | ORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | OMMISSION | OMB OMB Number: | PROVAL 3235-0287 | |
| Check this box if no longer subject to Section 16. SECURITIES SECURITIES | | | | | | | | burden hour response | Estimated average burden hours per | | |
| (Print or Type l | Responses) | | | | | | | | | | |
| WHITAKER ERIC S Syn | | | Symbol | r Name and . MOTOR | | | - | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| (Last) | (First) | (Middle) | 3. Date of | f Earliest Tr | ansaction | | | (Check | k all applicable |) | |
| (Month/D 3500 DEER CREEK ROAD 11/15/2 (Street) 4. If Ame | | | (Month/Day/Year) 11/15/2011 | | | | | Director 10% Owner XOfficer (give title Other (specify below) below) General Counsel | | | |
| | | | endment, Date Original nth/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | | |
| PALO ALT | O, CA 94304 | | | | | | | Form filed by M Person | lore than One Re | porting | |
| (City) | (State) | (Zip) | Tabl | le I - Non-D | erivative s | Securi | ities Acq | uired, Disposed of | , or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Dat (Month/Day/Year) |) Executio any | | 3. Transactio Code (Instr. 8) | 4. Securit or(A) or Dis (Instr. 3, 4 | sposed 4 and 5 (A) | l of (D) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| Comment | | | | Code V | Amount | or (D) | Price | (Instr. 3 and 4) | | | |
| Common Stock | 11/15/2011 | | | М | 10,000 | А | \$ 24.98 | 10,000 | D | | |
| Common Stock | 11/15/2011 | | | S | 10,000 | D | \$ 34 | 0 | D | | |

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.

Edgar Filing: WHITAKER ERIC S - Form 4

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) | orDeri Secu Acqu or D (D) | urities uired (A) isposed of r. 3, 4, | ve Expiration Date es (Month/Day/Year d (A) used of | | 7. Title and A Underlying S (Instr. 3 and | Securit |
|---|---|---|---|--|---------------------------------------|--|--|--------------------|---|---------------------------|
| | | | | Code V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amo or Num of Sh |
| Non-Qualified Stock Option (right to buy) | \$ 24.98 | 11/15/2011 | | М | | 10,000 | <u>(1)</u> | 11/08/2020 | Common Stock | 10,0 |

Reporting Owners

| Reporting Owner Name / Addres | s | Relationships | | | | | | | |
|--|------------|---------------|-----------------|-------|--|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | | |
| WHITAKER ERIC S 3500 DEER CREEK ROAD PALO ALTO, CA 94304 Signatures | | | General Counsel | | | | | | |
| /s/ Eric Whitaker | 11/15/2011 | | | | | | | | |

Reporting Person Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

Date

- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) 1/4th of the shares subject to the option become vested and exercisable one year from hire date and 1/48th of the shares subject to the option shall become vested and exercisable each month thereafter.

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.

**Signature of