FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-028									

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*						2. Issuer Name and Ticker or Trading Symbol Palo Alto Networks Inc [PANW]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
MCLAUGHLIN MARK D					1	Tulo Titlo Networks file [TANW]							X	X Director		10% (Owner		
-														\perp x	Offic	er (give title	Other	(specify	
(Last)	3. D	3. Date of Earliest Transaction (Month/Day/Year)							^	belov	w) ``	below)`						
C/O PALO ALTO NETWORKS INC.					06/	06/21/2016								President & CEO					
4401 GREAT AMERICA PKWY																			
4401 GREAT AMERICA PRW Y				4 11	A If A considerant Data of Original Filed (Manth/D 1977)														
(Ctt)					- 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)							Line)	Individual or Joint/Group Filing (Check Applicable Line)					
(Street)	CLARA CA		95054										\int_{X}^{y}	X Form filed by One Reporting Person					
SANIA	JLAKA C	1 3	95054												Forn	n filed by Mor	re than One Rep	orting	
					-										Pers		0 t. t	,o.ug	
(City)	(St	ate) (Zip)																
		Tabl	e I - N	on-Deriv	/ative	Sec	uritie	s Ac	quired	d, Di	sposed o	f, or I	3enet	ficially	Own	ed			
1. Title of S	Security (Inst	r. 3)		2. Transac	tion	on 2A. Deemed			3. 4. Securities Acquired (A) or						5. Amount of		6. Ownership	7. Nature	
				Date (Month/Da	v/Year)	Execution Date, (Year) if any		Transaction Disposed C		of (D) (Instr. 3, 4 ar		and 5)	Secur		Form: Direct (D) or Indirect	of Indirect Beneficial			
(monuses)					.,, . o,	(Month/Day/Year)		8)					Owne	d Following ((I) (Instr. 4)	Ownership			
									Code V		Amount	(A) or Pri		00		action(s)		(Instr. 4)	
		Code	ľ	Alliount	(D)			FII		(Instr.	3 and 4)								
Common Stock 06/21/20					.016				S		4,404(1)	D	\$1	27.10 2	567,303		D		
		Ta	ble II -	- Derivat	ive S	ecuri	ities	Acan	ired.	Disn	osed of,	or Be	nefic	ially C	wned				
											convertib								
1. Title of Derivative	2. Conversion or Exercise Price of	3. Transaction Date (Month/Day/Year)	3A. Dee	emed on Date,	4. Transa	ction	5. Number of Derivative Securities		6. Date Exercisable and Expiration Date			7. Title and Amount of			Price of	9. Number o	Ownership	11. Nature of Indirect	
Security (Instr. 3)			if any	/Day/Year)	Code ((ear) 8	Instr.			(Month/Day/Year)				Securities Underlying		Security (Instr. 5)	Securities Beneficially	Form: Direct (D)	Beneficial Ownership	
Derivative				Dayricary	0,	٠,		Acquired					Derivative		sti. 3)	Owned	or Indirect	(Instr. 4)	
Security						(A) or Security (Instr. Disposed and 4)				r. 3		Following Reported	(I) (Instr. 4)						
						of (D) (Instr. 3, 4									Transaction (Instr. 4)	(s)			
					and 5)							(111511.4)							
										Amou	ınt								
													or						
									Date		Expiration		Numb of	per					
					Code	٧	(A)	(D)	Exercis	sable	Date	Title	Share	es					

Explanation of Responses:

1. Represents the number of shares sold upon vesting of restricted stock units to cover tax withholding obligations.

Remarks:

/s/ Jeff True, Attorney-in-Fact for Mark D. McLaughlin

06/23/2016

** 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.