#### LEVY RICHARD M

Form 4

September 21, 2010

Check this box

if no longer

Section 16.

Form 4 or

obligations

may continue.

See Instruction

Form 5

subject to

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**OMB** 

**OMB APPROVAL** 

Number:

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January 31, 2005

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**SECURITIES** 

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

(Last)

(City)

(Print or Type Responses)

1. Name and Address of Reporting Person \* LEVY RICHARD M

2. Issuer Name and Ticker or Trading

Symbol

VARIAN MEDICAL SYSTEMS

5. Relationship of Reporting Person(s) to

Issuer

INC [VAR]

(Check all applicable)

3. Date of Earliest Transaction (Month/Day/Year)

09/20/2010

\_X\_\_ Director 10% Owner Officer (give title Other (specify

C/O VARIAN MEDICAL SYSTEMS, 3100 HANSEN WAY,

(Street)

(State)

(First)

MAIL STOP E-327

4. If Amendment, Date Original

Applicable Line)

Filed(Month/Day/Year)

(Middle)

(Zip)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

6. Individual or Joint/Group Filing(Check

PALO ALTO, CA 94304-1030

(City)	(State)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securit mor Dispos (Instr. 3, 4)	ed of (	` ′	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	09/20/2010		M	15,000	A	\$ 32.095	15,000	D		
Common Stock	09/20/2010		S <u>(1)</u>	15,000	D	\$ 59.6808 (2)	0	D		
Common Stock	09/20/2010		G(1) V	2,000	D	\$ 0	76,907	I	By Trust	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

### Edgar Filing: LEVY RICHARD M - Form 4

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SEC 1474 (9-02)

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)	Conversion or Exercise Price of	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of or Derivative Securities Acquired (A)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount Underlying Securiti (Instr. 3 and 4)	
	Derivative Security				or Disposed of (D) (Instr. 3, 4, and 5)				
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amou or Numb of Sha
Non-qualified Stock Option (Right to Buy)	\$ 32.095	09/20/2010		M	15,000	(3)	11/11/2013	Common Stock	15,0

## **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



## **Signatures**

/s/ John A. Thorson, Attorney in Fact for Richard M. Levy

09/21/2010

\*\*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) This transaction is pursuant to the filer's SEC Rule10b5-1 Stock Plan
- (2) The 15,000 shares were sold in multiple transactions executed on the same day at prices ranging from \$59.23 to \$59.89. The detailed breakdown will be furnished upon request.
- (3) Granted under the Varian Medical Systems, Inc. Omnibis Stock Plan which complies with Rule 16(b)-3. The option vests as follows: one third on 11/14/03, and the remaining shares in equal installments over the 24-month period 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.

Reporting Owners 2