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FORIVI 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB Number:								ours per			
(Print or Type Resp	ponses)										
WATKINS WILLIAM D Symbol			Symbol	er Name and Ticker or Trading ATE TECHNOLOGY [STX]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First) (M	/liddle)	3. Date of Earliest Transaction				(Chi	eck an applica	uic)		
(Month/Da 920 DISC DRIVE, ATTN: STOCK 10/27/20 PLAN ADMINISTRATION				-				Director10% Owner X Officer (give title Other (specify below) below) President and CEO			
			endment, Date Original onth/Day/Year)				6. Individual or Joint/Group Filing(CheckApplicable Line)_X_ Form filed by One Reporting Person				
SCOTTS VALLEY, CA 95067 — Form filed by More than One Reporting Person											
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Securi	ties Ac	quired, Disposed	of, or Benefic	ially Owned	
		saction Date 2A. Deemed /Day/Year) Execution Date, if any (Month/Day/Year)			4. Securiti n(A) or Dis (Instr. 3, 4) Amount	posed	of (D)	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 10 Shares)/27/2006			S	50,000	D	\$ 22.5	154,518 <u>(1)</u>	D		
Common Shares								302,503	I	Wolf Pack Limited Partnership	
Common Shares								2,035,050	I	The Watkins Family Trust	

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

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information contained in this form are not
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(9-02)

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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)	Code of		5		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
NQ Stock Option	\$ 8.22					02/14/2004(2)	02/14/2013	Common Shares	1,322,174
NQ Stock Option	\$ 15.065					09/27/2006 <u>(3)</u>	09/27/2012	Common Shares	600,000

Reporting Owners

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Reporting Owner Name / Address	Relationships						
	Director	10% Owner	lationships Officer President and CEO	Other			
WATKINS WILLIAM D 20 DISC DRIVE ATTN: STOCK PLAN ADMINISTRATION SCOTTS VALLEY, CA 95067			President and CEO				
Signatures							
/S/ Roberta S. Cohen for William D. Watkins	10/3	1/2006					
** Signature of Reporting Person	D	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) Includes 422 shares purchased on 31 July 2006 under the Employee Stock Purchase Plan.

Options granted to the Reporting Person under the 2001 Share Option Plan are subject to a six-year vesting schedule. 200,000 of the option shares vested on February 14, 2005. 250,000 option shares vested proportionally on a monthly basis over the one year period from

(2) February 14, 2005 to February 14, 2006. 300,000 option shares vest proportionally on a monthly basis from February 14, 2006 to February 14, 2007. 350,000 option shares vest proportionally on a monthly basis from February 14, 2007 to February 14, 2008. 400,000 option shares vest proportionally on a monthly basis from February 14, 2009.

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Options granted to the Reporting Person under the Issuer's 2004 Stock Compensation Plan are subject to a four-year vesting schedule.

(3) One quarter of the option shares vested on September 27, 2006. The remaining option shares will vest proportionally each month over the 36 months following September 27, 2006.

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.