## Edgar Filing: Britt Douglas - Form 4

| Britt Douglas           | 8                 |                    |                         |                             |  |                                |           |                    |  |                         |              |  |  |
|-------------------------|-------------------|--------------------|-------------------------|-----------------------------|--|--------------------------------|-----------|--------------------|--|-------------------------|--------------|--|--|
| Form 4                  |                   |                    |                         |                             |  |                                |           |                    |  |                         |              |  |  |
| March 19, 20            | 009               |                    |                         |                             |  |                                |           |                    |  |                         |              |  |  |
| FORM                    | 14                |                    |                         |                             |  |                                |           |                    |  |                         | PPROVAL      |  |  |
|                         | UNITE             | D STATE:           |                         | ITIES A                     |  |                                |           | NGE (              | COMMISSION   | OMB<br>Number:          | 3235-0287    |  |  |
| Check thi<br>if no long |                   |                    |                         |                             |  |                                |           |                    |  | Expires:                | January 31,  |  |  |
| subject to              |                   | EMENT O            | F CHAN                  |                             |  | <b>BENEFICIAL OWNERSHIP OF</b> |           |                    |  | Estimated average       |              |  |  |
| Section 1               |                   | SECURITIES         |                         |                             |  |                                |           |                    |  | burden hours per        |              |  |  |
| Form 4 or               |                   |                    |                         |                             |  |                                |           |                    |  | response 0.5            |              |  |  |
| Form 5<br>obligatior    | <b>1</b> 0        |                    |                         |                             |  |                                |           | -                  | e Act of 1934,   |                         |              |  |  |
| may conti               |                   |                    |                         | •                           | -  | -                              | - ·       |                    | f 1935 or Sectio   | n                       |              |  |  |
| See Instru<br>1(b).     | iction            | 30(h)              | ) of the In             | vestmen                     | t Coi                                      | mpany                          | y Act     | of 194             | 40   |                         |              |  |  |
| 1(0).                   |                   |                    |                         |                             |  |                                |           |                    |  |                         |              |  |  |
| (Print or Type R        | Responses)        |                    |                         |                             |  |                                |           |                    |  |                         |              |  |  |
| 1. Name and A           | ddress of Reporti | ng Person <u>*</u> | 2. Issuer               | Name an                     | d Tic                                      | ker or T                       | Гradin    | g                  | 5. Relationship of   | Reporting Pers          | son(s) to    |  |  |
| Britt Douglas Symbol    |                   |                    |                         | nbol                        |  |                                |           |                    | Issuer   |                         |              |  |  |
|                         |                   |                    |                         | SILICON GRAPHICS INC [SGIC] |  |                                |           |                    | (Check all applicable)                                     |                         |              |  |  |
| (Last)                  | (First)           | (Middle)           | 3. Date of              | Earliest 7                  | Fransa                                     | action                         |           |                    | (Chee  | k an applicable         | <i>(</i> )   |  |  |
| (Month/D                |                   |                    |                         | th/Day/Year)                |  |                                |           |                    | Director 10% Owner   |                         |              |  |  |
|                         | ON GRAPHIC        |                    | 03/17/20                | 009                         |  |                                |           |                    | X Officer (give<br>below)                                  | e title Othe<br>below)  | er (specify  |  |  |
| INC., 1140 I            | E. ARQUES A       | VENUE              |                         |                             |  |                                |           |                    | /  | Worldwide Sal           | es           |  |  |
|                         | (Street)          |                    | 4. If Ame               | ndment, D                   | Date O                                     | Driginal                       |           |                    | 6. Individual or Jo  | oint/Group Filir        | ng(Check     |  |  |
| Filed(Mon               |                   |                    |                         | (Month/Day/Year)            |  |                                |           |                    | Applicable Line)<br>_X_ Form filed by One Reporting Person |                         |              |  |  |
|                         |                   |                    |                         |                             |  |                                |           |                    | _X_ Form filed by 0<br>Form filed by N                     |                         |              |  |  |
| SUNNYVA                 | LE, CA 94085      | )                  |                         |                             |  |                                |           |                    | Person   |                         | porting      |  |  |
| (City)                  | (State)           | (Zip)              | Table                   | e I - Non-                  | Deriv                                      | vative S                       | Securi    | ties Acc           | uired, Disposed of   | f, or Beneficial        | ly Owned     |  |  |
| 1.Title of              | 2. Transaction I  | Date 2A. Dee       | emed                    | 3.                          | 4.   | Securit                        | ties Ac   | equired            | 5. Amount of   | 6. Ownership            | 7. Nature of |  |  |
| Security                | (Month/Day/Ye     |                    | on Date, if             | Transact                    |  |                                | sposed    | d of               | Securities   | Form: Direct            | Indirect     |  |  |
| (Instr. 3)              |                   | -                  | any<br>(Month/Day/Year) |                             | Code (D)<br>(Instr. 8) (Instr. 3, 4 and 5) |                                |           | 5)                 | Beneficially   | (D) or<br>Indirect (I)  | Beneficial   |  |  |
|                         |                   | (WOIIII            | /Day/Teal)              | (msu. o                     | ) (11                                      | (mstr.  3, 4  and  3)          |           | Owned<br>Following | Indirect (I)<br>(Instr. 4)                                 | Ownership<br>(Instr. 4) |              |  |  |
|                         |                   |                    |                         |                             |  |                                | (A)       |                    | Reported   | . ,                     |              |  |  |
|                         |                   |                    |                         |                             |  |                                | (A)<br>or |                    | Transaction(s)   |                         |              |  |  |
|                         |                   |                    |                         | Code                        | V Aı                                       | mount                          | (D)       | Price              | (Instr. 3 and 4)   |                         |              |  |  |
| Common<br>Stock         | 03/17/2009        |                    |                         | F                           | 53   | 39                             | D         | \$<br>0.49         | 17,673   | 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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

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| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transactio<br>Code<br>(Instr. 8) | 5.<br>onNumber<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3,<br>4, and 5) |                     | ate                | Unde<br>Secur | ınt of<br>rlying                       | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secu<br>Bene<br>Owna<br>Follo<br>Repo<br>Trans<br>(Instr |
|---|---|---|---|--|---|---------------------|--------------------|---------------|--|---|--|
|   |   |   |   | Code V                                 | (A) (D)   | Date<br>Exercisable | Expiration<br>Date | Title         | Amount<br>or<br>Number<br>of<br>Shares |   |  |

## **Reporting Owners**

| <b>Reporting Owner Name / Address</b>  | Relationships |           |                             |       |  |  |  |  |
|--|---------------|-----------|-----------------------------|-------|--|--|--|--|
| 1  | Director      | 10% Owner | Officer                     | Other |  |  |  |  |
| Britt Douglas<br>C/O SILICON GRAPHICS, INC.<br>1140 E. ARQUES AVENUE<br>SUNNYVALE, CA 94085  |               |           | SVP -<br>Worldwide<br>Sales |       |  |  |  |  |
| <u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u></u> |               |           |                             |       |  |  |  |  |

## Signatures

/s/ Douglas Britt 03/19/2009

<u>\*\*</u>Signature of 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).

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.