VARIAN MEDICAL SYSTEMS INC

Form 4

February 24, 2014

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

2. Issuer Name and Ticker or Trading

VARIAN MEDICAL SYSTEMS

OMB

OMB APPROVAL

3235-0287 Number:

January 31, Expires: 2005

10% Owner

Other (specify

0.5

Estimated average burden hours per

response...

if no longer subject to Section 16. Form 4 or Form 5

obligations

may continue.

See Instruction

Check this box

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

Symbol

INC [VAR]

02/21/2014

(Month/Day/Year)

1(b).

(Last)

1.Title of

Security

(Instr. 3)

Stock

(Print or Type Responses)

1. Name and Address of Reporting Person *

LARET MARK R

(First) (Middle)

2. Transaction Date 2A. Deemed

(Month/Day/Year) Execution Date, if

C/O VARIAN MEDICAL SYSTEMS, INC., 3100 HANSEN

WAY, MAIL STOP E327

(Street)

Filed(Month/Day/Year)

(Month/Day/Year)

4. If Amendment, Date Original

S

3. Date of Earliest Transaction

6. Individual or Joint/Group Filing(Check Applicable Line)

X_ Director

Officer (give title

Issuer

X Form filed by One Reporting Person Form filed by More than One Reporting

5. Relationship of Reporting Person(s) to

(Check all applicable)

PALO ALTO, CA 94304-1038

(City) (State) (Zip)

3. 4. Securities Acquired

> Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)

Securities Beneficially Owned Following Reported

5. Amount of

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

6. Ownership 7. Nature of Form: Direct Indirect (D) or Beneficial Indirect (I) Ownership (Instr. 4) (Instr. 4)

(A) Transaction(s) or (Instr. 3 and 4)

Code V Amount (D) Price

Common 02/21/2014

1,411

D

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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 Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)	Execution Date, if			6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities		Deriva
Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	(Month/Day/	rear)	(Instr. 3 and	4)	Securi (Instr.
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Deferred Stock Units	(1)	02/21/2014		A	1,912	(2)	(2)	Common Stock	1,912	\$ (

Reporting Owners

Reporting Owner Name / Address

Director 10% Owner Officer Other

LARET MARK R C/O VARIAN MEDICAL SYSTEMS, INC. 3100 HANSEN WAY, MAIL STOP E327 PALO ALTO, CA 94304-1038



Signatures

/s/ Kimberley E. Honeysett, Attorney in Fact for Mark R. Laret

**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) Each Deferred Stock Unit represents the right to receive one share of VAR common stock.
- (2) The Deferred Stock Units vest in four equal quarterly installments over a 12 month period beginning February 21, 2014. Vested shares will be delivered to the reporting person the earlier of three years from the grant date, or termination/retirement date.

02/24/2014

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.

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