FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0287 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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 [®] WALL ROBERT T | | | | | | 2. Issuer Name and Ticker or Trading Symbol NETWORK APPLIANCE INC [NTAP] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | |
|--|--|--|-------------------|--|----------------|--|---|---------------------------------|--|----|-----------------|---|---|--|--|-------------------------|--|--|--|--|
| (Last) | (Last) (First) (Middle) | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 09/02/2004 | | | | | | | | Offic | Director Officer (give title below) | | 10% Owner Other (specify below) | | | |
| 184 BUTCH CASSIDY DRIVE | | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable | | | | | |
| (Street) | | | | | | | | | | | | | | Line) X Form filed by One Reporting Person | | | | | | |
| TELLURIDE CO 81435 | | | | | | | | | | | | | Form filed by More than One Reporting Person | | | | | | | |
| (City) | (S | tate) (| Zip) | | | | | | | | | | | | | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day | | | | | Execution Date | | | 3. Transac Code (In 8) | | | | uired (A) Instr. 3, 4 | Secur Benef Owne | icially d | Form: (D) or Indired | Direct ct (I) | 7. Nature of Indirect Beneficial Ownership | | | |
| | | | | | | | | | Code | v | Amoun | t (A) (D) | or Price | 1 | | (Instr. | 4) | (Instr. 4) | | |
| 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) | Execution Date, T | | | tion str. | 5. Num of Derivat Securit Acquir (A) or Dispos of (D) (Instr. and 5) | tive ties red sed | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | y Di or (I) 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | v | (A) | (D) | Date Exercisabl | | piration ate | Title | Amount or Number of Shares | | | | | | | |
| Non- Qualified Stock Option (right to buy) | \$20.61 | 09/02/2004 | | | А | | 15,000 | | (1) | 09 | //01/2014 | Common Stock | 15,000 | \$0 | 15,000 | | D | | | |

Explanation of Responses:

1. Option is immediately exercisable, but any shares purchased under the option will be subject to repurchase by the Company at the option exercise price paid per share, upon the Optionee's cessation of Board service prior to vesting in those shares. The shares will vest upon the Optionee's continuation in Board service through the day immediately preceding the next Annual Stockholders Meeting following the grant date.

| By: Janice Mahoney by Power | | | | | | | |
|----------------------------------|------------|--|--|--|--|--|--|
| of Attorney For: Robert T. | 09/07/2004 | | | | | | |
| <u>Wall</u> | | | | | | | |
| ** 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.