FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPR | OMB APPROVAL | | | | | | | |
|----------------------|--------------|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | |
| Estimated average bu | rden | | | | | | | |
| 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

| 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 Issu (Check all applicable) X Director 10% Own | | | | | |
|---|---|--|--|-------------------------|-----------------|--|---|-------|---|-------|--------------------|---|----------------|--|--|--|--|---|-------------------------|--|
| (Last) | (First) (Middle) UTCH CASSIDY DRIVE | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/28/2008 | | | | | | | | | | Officer (give title below) | | | Other (specify below) | |
| (Street) | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Individual or Joint/Group Filing (Check Applicabl Line) X Form filed by One Reporting Person | | | | | |
| TELLUR | IDE CO | 8 | 1435 | | | | | | | | | | | Form filed by More than One Reporting Person | | | | | | |
| (City) | (St | ate) (Z | Zip) | | | | | | | | | | | | | | | | | |
| | | Tabl | e I - N | lon-Deriv | ative | Secu | ıritie | s Acc | uired, | Dis | posed of | f, or | Ben | eficia | ally | Own | ed | | | |
| 1. Title of Security (Instr. 3) | | | 2. Transaction Date (Month/Day/Yea | | Execution Date, | | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (Disposed Of (D) (Instr. 3 and 5) | | | | 3, 4 S | | ount of rities ficially d wing | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | | | |
| | | | | | | | | | Code | v | Amount | | (A) or (D) | Price | | Repo Trans | | (111501.44) | (111501.4) | |
| Common Stock 03/ | | | | 03/28/2 | 800 | | | S | | 3,585 | | D | \$20.3 | | 256,486 | | D | | | |
| Common | Common Stock 03/28/ | | | 03/28/2 | 008 | | | S | | 100 | _ | D | \$20. | .27 256,3 | | 56,386 | D | | | |
| Common | Common Stock 03/28/ | | | 03/28/2 | 008 | | | | S | | 2,900 | | D | \$20. | .26 | 253,486 | | D | | |
| Common | Common Stock 0 | | | 03/28/2 | 5/28/2008 | | | | | | 5,200 | | D | \$20. | .24 248,28 | | 48,286 | D | | |
| Common | Stock | | | 03/28/2 | 800 | | | | S | | 2,400 | | D | \$20. | .22 | 2 | 45,886 | D | | |
| Common | Stock | | | 03/28/2 | 800 | | | | S | | 5,550 | | D | \$20 | .2 | 2. | 40,336 | D | | |
| Common Stock | | | 03/28/2 | 8/2008 | | | | S | | 600 | | D | | \$20.19 | | 39,736 | D | - | | |
| Common Stock | | | 03/28/2008 | | | | S | _ | 2,800 | | D | \$20. | _ | | 36,936 | D | | | | |
| Common | Stock | _ | | 03/28/2 | | | 4. | _ | S | | 6,865 | | D | \$20. | | | 30,071 | D | | |
| | | Ia | bie ii | - Derivati (e.g., pu | | | | | , | • | osea of, o | | | , | y O | wned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | Execut | | | ction nstr. | | | 6. Date E Expiratio (Month/D | on Da | | Amount of Securities Underlying Derivative Security (II 3 and 4) | | 9 | 8. Price of Derivative Security (Instr. 5) | ivative urity | 9. Number of derivative Securities Beneficially Owned Following Reported Transactions (Instr. 4) | Ownersh Form: Direct (D or Indire (I) (Instr. 4) | Beneficial Ownership | |
| | of Respons | | | | Code | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | or Nu of | ount mber ares | | | | | | |

Explanation of Responses:

By: Janice Mahoney by Power of Attorney For: Robert T. 03/31/2008 Wall

** Signature of Reporting Person Date

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

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.

 $^{^{\}star}$ 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).