Edgar Filing: AGILYSYS INC - Form 4

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| Form 4 | | | | | | | | | | | |
|--|---|---|----------|---|------------|--------------|-------------|---|--|-----------|--|
| August 16, 20 | 1 | | ECUD | | | ~TT A | NCEO | OMMESION | | PROVAL | |
| | - UNITED S | SIAIES S | | | | | NGE C | COMMISSION | OMB Number: | 3235-0287 | |
| Check thi if no long subject to Section 10 Form 4 or | er STATEM 6. | Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES | | | | | | | Expires: Estimated a burden hour response | • | |
| Form 5 obligatior may conti <i>See</i> Instru 1(b). | Insue. Section 17(a | a) of the Pu | blic Ut | | ing Con | ipany | y Act of | e Act of 1934, 7 1935 or Section 0 | | | |
| (Print or Type R | lesponses) | | | | | | | | | | |
| Badger Kyle C Symbol | | | | er Name and Ticker or Trading (SYS INC [AGYS] | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| (Last) | (First) (N | | | | - | J | | (Checl | k all applicable |) | |
| | | | | te of Earliest Transaction th/Day/Year) 5/2013 Amendment, Date Original Month/Day/Year) | | | | Director 10% Owner X Officer (give title Other (specify below) below) SVP, GC and Secretary 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| | | | | | | | | | | | |
| ALPHARET | TTA, GA 30005 | | | | | | | Form filed by M Person | lore than One Re | porting | |
| (City) | (State) | (Zip) | Table | e I - Non-D | erivative | Secur | ities Acq | uired, Disposed of | , or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution I any (Month/Day | Date, if | 3. Transactio Code (Instr. 8) Code V | (Instr. 3, | spose | d 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) | | |
| Common Shares, No Par Value | 08/15/2013 | | | Р | 1,000 | A | \$ 11.29 | 40,474 | 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 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) | 4. Transact Code (Instr. 8) | 5. ionNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | ; | Date | Secur | unt of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr |
|---|---|---|---|--------------------------------------|--|---------------------|--------------------|-------|--|---|--|
| | | | | Code V | 7 (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | | |
|---|---------------|--------------|---------------------|-------|--|--|--|--|
| 1 | Director | 10% Owner | Officer | Other | | | | |
| Badger Kyle C 1000 WINDWARD CONCOURSE SUITE 250 ALPHARETTA, GA 30005 | | | SVP, GC and Secreta | ry | | | | |
| Signatures | | | | | | | | |
| /s/ Derrick D. Anderson via Power o Badger. | f Attorne | y for Kyle C | . 08/16/2 | 013 | | | | |
| <u>**</u> Signature of Reporting | g 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).

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.