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ACI WORLI	DWIDE, INC.											
Form 4												
July 06, 2016	5											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB AF	OMB APPROVAL		
	CUNIVI 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						COMMISSION	OMB Number:	3235-0287			
Check thi							Exhirds.	January 31,				
if no longer subject to STATEMENT OF CHA				NGES IN BENEFICIAL OWNERSHIP OF					Estimated average burden hours per			
Section 16.				SECURITIES								
Form 4 or Form 5			~ • •		~ ·				response 0.5			
obligation	no -						•	e Act of 1934,				
may cont	inue. Section 1			vestment	•	· ·		1935 or Section	n			
<i>See</i> Instru 1(b).	action	50(II)	of the fit	vestment	Compan	y Ac	1 01 194	0				
(Print or Type F	Responses)											
Saks Craig S Sy			2. Issuer Symbol	2. Issuer Name and Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
			ACI WORLDWIDE, INC. [ACIW]				CIW]					
(Last)	(First)	(First) (Middle) 3. Date of				f Earliest Transaction			(Check an applicable)			
			(Month/D	Ionth/Day/Year)			Director		Owner			
			07/01/2016					XOfficer (give titleOther (specify below) below) Group President				
	(Street)		4. If Ame	ndment, Dat	te Origina	l		6. Individual or Jo	int/Group Filir	g(Check		
								Applicable Line)				
NAPLES, F	L 34105							_X_ Form filed by C Form filed by M				
								Person				
(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 Date, if any (Month/Day/Year)			3.4. Securities AcquiredTransaction(A) or Disposed of (D)Code(Instr. 3, 4 and 5)(Instr. 8)				Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)				
				Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				
Common Stock	07/01/2016			D	1,440 (1)	D	\$ 19.56	13,570	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)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Tit	le and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration D	Date	Amou	int of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day	/Year)	Under	rlying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	. 3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
									or		
						Date	Expiration	Title	Number		
						Exercisable	Date	The	of		
				Code V	(A) (D)				Shares		
				Coue v	(\mathbf{A}) (\mathbf{D})				Shares		
Reno	rtina O	whore									

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Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Saks Craig S 3520 KRAFT ROAD SUITE 300 NAPLES, FL 34105			Group Pr	esident				
Signatures								
By: /s/ Dennis Byrnes, Attorne Saks		07/06/2016						
**Signature of Reporti		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) Represents shares surrendered by the reporting person to pay the tax liability due upon the vesting of one-half of their restricted stock award granted on February 23, 2016.

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.