Edgar Filing: EBIX INC - Form 4

EBIX INC Form 4 March 20, 20	014									
FORM								-	PPROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287	
Check this box if no longer subject to Section 16. Form 4 or								burden hou	Expires: January 31, 2005 Estimated average burden hours per response 0.5	
Form 5 obligations may continue. See Instruction 1(b). 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										
(Print or Type I	Responses)									
1. Name and A SENGE JAI	suer Name and Ticker or Trading ol K INC [EBIX]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Last)	(First) (N	Aiddle) 3. Date of	3. Date of Earliest Transaction				(Check an applicable)			
1629 SEEG	AR ROAD		(Month/Day/Year) 03/18/2014				Director 10% Owner X Officer (give title Other (specify below) SVP - Ebix Health			
	Amendment, Date Original Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person					
PITTSBUR	GH, PA 15241						Form filed by M Person	Aore than One Ro	eporting	
(City)	(State)	(Zip) Tab	le I - Non-De	erivative S	Securi	ties Ac	quired, Disposed of	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Data (Month/Day/Year)		Code	Disposed (Instr. 3,	l (A) o l of (D)		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock	03/18/2014		А	8,721	А	\$0	21,219	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. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
SENGE JAMES SCOTT SR 1629 SEEGAR ROAD PITTSBURGH, PA 15241			SVP - Ebix Health				
Signatures							
/s/ James Scott Senge Sr.	03/20/201	4					
**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).

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.