## Edgar Filing: EBIX INC - Form 4

EBIX INC

Form 4											
· · · · · · · · · · · · · · · · · · ·	July 11, 2017 FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION							-	OMB APPROVAL		
<b>UNITED STATES SECURITIES AND EXCHANGE COMMISSION</b> Washington, D.C. 20549								OMB Number:	3235-0287		
Check this if no longe subject to Section 16 Form 4 or	F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES					Expires: Estimated a burden hou response	irs per				
Form 5 obligation may contin <i>See</i> Instruct 1(b).	s Section 17(	a) of the	Public Ut	ility Hold	ing Com		ge Act of 1934, f 1935 or Sectio 40				
(Print or Type R	esponses)										
			2. Issuer Name <b>and</b> Ticker or Trading Symbol EBIX INC [EBIX]				5. Relationship of Reporting Person(s) to Issuer				
							(Check all applicable)				
(Last) (First) (Middle) 56 EAST 87TH ST, APT 5DC			3. Date of Earliest Transaction (Month/Day/Year) 06/30/2017				X_ Director 10% Owner Officer (give title Other (specify below) below)				
				nendment, Date Original (onth/Day/Year)			<ul> <li>6. Individual or Joint/Group Filing(Check Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>				
NEW YORK	K, NY 10128						Person	More than One R	eporting		
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	ecurities Ac	quired, Disposed o	f, or Beneficia	lly Owned		
(Instr. 3) any		) Executi any	emed on Date, if /Day/Year)	3. Transactic Code (Instr. 8)	TransactionAcquired Code Disposed		5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code V	Amount	<ul><li>(A)</li><li>or</li><li>(D) Price</li></ul>	Transaction(s) (Instr. 3 and 4)				
Common Stock							41,000	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)

## Edgar Filing: EBIX INC - Form 4

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. Transactio Code (Instr. 8)	5. Num prof Deriv Securiti Acquire (A) or Dispose (D) (Instr. 3 and 5)	vative es ed ed of	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
option to purchase common stock	\$ 53.9	06/30/2017		A	6,000		06/30/2018 <u>(1)</u>	06/30/2022	Common Stock	6,000
option to purchase common stock	\$ 49.22						05/02/2017 <u>(1)</u>	05/02/2021	Common Stock	6,000
option to purchase common stock	\$ 28.59						04/14/2016 <u>(1)</u>	04/14/2020	Common Stock	6,000

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships						
	Director	10% Owner	Officer	Other			
HEBARD GEORGE 56 EAST 87TH ST, APT 5DC NEW YORK, NY 10128	х						
Signatures							
/s/ George W. Hebard, III	07/11/201	7					

## **Explanation of Responses:**

\* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

Date

- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) Stock Options become exercisable 1/4 on the first anniversary of date of grant with the remaining options vesting ratably on the first day of each quarter over the next three years.

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.

\*\*Signature of Reporting

Person