Edgar Filing: EURONET WORLDWIDE INC - Form 4

| EURONET V Form 4 August 17, 20 | VORLDWIDE IN | ١C | | | | | | | | | |
|---|--|--|----------------|--|---|------------------|-------------------|---|--|--------|--|
| FORM 4 UNITED STATES SECUR Was Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue | | | | ITIES AND EXCHANGE (hington, D.C. 20549 GES IN BENEFICIAL OW SECURITIES 5(a) of the Securities Exchang ility Holding Company Act of vestment Company Act of 194 | | | | NERSHIP OF e Act of 1934, f 1935 or Sectio | OMB Number: Expires: Estimated a burden hou response | rs per | |
| 1(b). | | | | | | | | | | | |
| NEWMAN JEFFREY B Syml EUF | | | Symbol | Name and ET WOR | | | - | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| (Mon | | | | e of Earliest Transaction n/Day/Year) /2016 | | | | Director 10% Owner Officer (give title Other (specify below) below) below) Exec VP and General Counsel | | | |
| | (Street) 4. If Amer Filed(Mon | | | | - | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting | | | |
| LEAWOOD | | 7in) | | | | | | Person | | | |
| (City) 1.Title of Security (Instr. 3) Common | (State) (2. Transaction Date (Month/Day/Year) | Zip) 2A. Deemo Execution any (Month/Da | ed Date, if | 3. Transactic Code (Instr. 8) Code V | 4. Securi on(A) or Di (D) (Instr. 3, | ties A ispose | cquired d of | Juired, Disposed o 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | f, or Beneficial 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | • | |
| Stock, par value \$0.02 per share | 08/16/2016 | | | S | 5,772 | D | \$ 77.8 (1) | 8,833 <u>(2)</u> | D | | |

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

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 4. Transactio Code (Instr. 8) | 5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Amou Unde Secur | rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Owne 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 | | | | | | | |
|--|---------------|-----------|-----------------------------|-------|--|--|--|--|
| FB | Director | 10% Owner | Officer | Other | | | | |
| NEWMAN JEFFREY B C/O EURONET WORLDWIDE, INC. 3500 COLLEGE BOULEVARD LEAWOOD, KS 66211 | | | Exec VP and General Counsel | | | | | |
| Signatures | | | | | | | | |
| | | | | | | | | |

/s/ Jeffrey B. 08/17/2016 Newman

**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).

The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$77.50 to \$78.06, inclusive. The Reporting Person undertakes to provide to Euronet Worldwide, Inc., any security holder of Euronet Worldwide,

- (1) Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range referred herein.
- Includes an additional 81 shares for the fourth quarter 2015, an additional 84 shares for the first quarter 2016 and an additional 85 shares (2) for the second quarter 2016 acquired by the Reporting Person pursuant to the Issuer's Employee Stock Purchase plan.

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.