## Edgar Filing: HEARTLAND PAYMENT SYSTEMS INC - Form 4

HEARTLAN Form 4 June 11, 2013	ID PAYMENT S	YSTEM	S INC									
FORM										PPROVAL		
	s box s								OMB Number:	3235-0287		
if no long subject to Section 1 Form 4 or									Expires: Estimated a burden hou response	rs per		
Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Security Section 17(a) of the Public Utility Holding Corr 30(h) of the Investment Compare							ecurities Exchange Act of 1934, g Company Act of 1935 or Section					
(Print or Type R	Responses)											
1. Name and Address of Reporting Person <u>*</u> CARR ROBERT O			2. Issuer Name <b>and</b> Ticker or Trading Symbol				5	5. Relationship of Reporting Person(s) to Issuer				
			HEARTLAND PAYMENT SYSTEMS INC [HPY]					(Check all applicable)				
(Last) (First) (Middle) C/O HEARTLAND PAYMENT SYSTEMS, INC., 90 NASSAU			3. Date of Earliest Transaction (Month/Day/Year) 06/10/2015					X Director 10% Owner X Officer (give title Other (specify below) Delow) Chairman of the Board and CEO				
STREET	INC., 90 INASSF	10										
	(Street)			ndment, Date Original th/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
PRINCETON, NJ 08542								Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	ecurit	ies Acq	quired, Disposed of	f, or Beneficial	lly Owned		
1.Title of Security (Instr. 3)	any		emed on Date, if Day/Year)	Code (D)			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, par value \$0.001 per share	06/10/2015			G <u>(1)</u>	45,000	D	\$ 0	416,201	D (2)			

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

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#### number.

# 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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. 5. TransactionNumber Code of (Instr. 8) Derivatives Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		Amou Under Secur	tle and unt of rrlying rities 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
Repo	rting O	wners		Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		
	Reporting (	Owner Name / Addre		rector 10 <sup>-</sup>	% Owner	<b>Relation</b> Officer	nships			Other	

Chairman of the Board and CEO

CARR ROBERT O C/O HEARTLAND PAYMENT SYSTEMS, INC. 90 NASSAU STREET PRINCETON, NJ 08542

PRINCETON, NJ (

## Signatures

/s/ Edythe Katz Nipper,	06/11/2015
attorney-in-fact	00/11/2013

\*\*Signature of Reporting Person

# **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).

Date

(1) Gift by reporting person to a 501(c)(3) charity.

The reporting person's indirect beneficial ownership consists of 116,487 shares of Heartland Payment Systems, Inc. (the "Issuer") common stock held by The Robert O. Carr 2000 Irrevocable Trust for Emmalee Carr. The reporting person disclaims beneficial

(2) ownership of the Issuer's common stock held by The Robert O. Carr 2000 Irrevocable Trust for Emmalee Carr. This report shall not be deemed an admission that the reportingperson is the beneficial owner of the shares of the Issuer's common stock for purposes of Section 16 or for any other purpose.

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.