## Edgar Filing: NIC INC - Form 4/A

NIC INC

Form 4/A											
April 03, 202											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								-	PPROVAL		
Washington, D.C. 20549								COMMISSION	OMB Number:	3235-0287	
Section 16.									Expires:	January 31, 2005	
				NGES IN BENEFICIAL OWNERSHIP OI SECURITIES				NERSHIP OF	Estimated a		
									burden hours per		
Form 4 o Form 5	Form 4 or Form 5 Filed pursuant to Section 16(a) o				o Coouri	ian D	wahana	a A at of $1024$	response	0.5	
obligation								f 1935 or Section	n		
may cont	inue.	· · /	) of the In	-	U	· ·	•		11		
See Instru 1(b).	uction	50(11)	) of the m	vestment	. Compu	iy 11e					
- (-).											
(Print or Type I	Responses)										
1 Name and A	ddress of Penor	ting Person *	<b>2</b> I	N	I.T. 1	т I'		5. Relationship of	Penarting Per	con(s) to	
				suer Name and Ticker or Trading				Issuer	reporting reison(s) to		
KOVZAN STEPHEN M Symbol NIC INC []					71						
(Last) (First) (Middle)			3. Date of Earliest Transaction					(Check all applicable)			
(Last)	(1130)	(Wildule)	(Month/E		ransaction			Director	10%	Owner	
			1/30/2015				X_Officer (give title Other (specify				
PARKWAY, SUITE 300				b			below) below) Chief Financial Officer				
			4 If Ame	I. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check Applicable Line)				
				iled(Month/Day/Year)							
				/02/2015				_X_ Form filed by One Reporting Person			
OLATHE, I	KS 66061			Form filed by M Person					More than One Reporting		
(City)	(State)	(Zip)	Tah	le I - Non-I	Dorivativa	Socur	ities Aco	uired, Disposed of	° or Ronoficial	ly Ownod	
1.Title of	2 Transaction	Data 24 Daa					-	5. Amount of	6. Ownership	•	
Security	2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date			*				Securities	Form: Direct		
(Instr. 3)		any	Code (Instr. 3, 4 and 5) Day/Year) (Instr. 8)					-	(D) or	Beneficial	
		(Month/						Owned Following	Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
								Reported	(1130. 4)	(1130. 4)	
						(A) or		Transaction(s)			
				Code V	Amount		Price	(Instr. 3 and 4)			
Common Stock	01/30/2015			F <u>(1)</u>	5,448 (2)	D	\$ 16.42	171,772	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)	4. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int 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			
KOVZAN STEPHEN M 25501 WEST VALLEY PARKWAY SUITE 300 OLATHE, KS 66061			Chief Financial Officer				
Signatures							
/s/Aimi Daughtery, Attorney-in-Fact for Kovzan	04/03/2015						
<pre>**Signature of Reporting Person</pre>			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 to NIC Inc. by the Reporting Person to satisfy tax withholding obligations on vesting of performance-based and service-based restricted shares.
- (2) This form is being amended to correct an administrative error in the calculation of shares surrendered to NIC Inc. by the Reporting Person to satisfy tax withholding obligations on vesting of restricted shares.

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.