Edgar Filing: REALPAGE INC - Form 4

DEALDACE INC

Form 4											
September 1									OMB AF	PROVAL	
FORN	14 UNITED S	STATES			ND EX(D.C. 20		NGE C	OMMISSION	OMB Number:	3235-0287	
Check the if no long	is box e ^r STATEMENT OF CHANGES IN RENEFICIAL OWNER							NERSHIP OF	Expires:	January 31 2005	
Section 16. SECURITIES burg							burden hour response	Estimated average burden hours per response 0.			
(Print or Type I	Responses)										
1. Name and Address of Reporting Person <u>*</u> Barker Timothy J			2. Issuer Name and Ticker or Trading Symbol REALPAGE INC [RP]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First) (M	(liddle)	3. Date of Earliest Transaction								
4000 INTERNATIONAL PARKWAY			(Month/Day/Year) 09/09/2013					Director 10% Owner X Officer (give title Other (specify below) below) Chief Financial Officer			
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)					 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
CARROLL	TON, TX 75007							Person	ore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-E	Derivative S	Securi	ties Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if any (Month/Day/Year)			n Date, if	Code (Instr. 3, 4 and 5) ear) (Instr. 8)					6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)			
Common Stock	09/09/2013			М	50,000	А	\$7	244,094	D		
Common Stock	09/09/2013			S	50,000	D	\$ 21.35 (1)	194,094	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.

Edgar Filing: REALPAGE INC - Form 4

 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. Transactio Code (Instr. 8)	5. Number of 6. Date Exercisable and orDerivative Expiration Date Securities (Month/Day/Year) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title and Amount Underlying Securitie (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amou or Numb of Sha
Employee Stock Options (Right to Buy)	\$ 7	09/09/2013		М	50,000	04/01/2008 <u>(2)</u>	02/28/2018	Common Stock	50,0

Reporting Owners

Reporting Owner Name / Address		Relationships						
	reporting owner rune / runess		10% Owner	Officer	Other			
Barker Timothy J 4000 INTERNATIONAL PA CARROLLTON, TX 75007			Chief Financial Officer					
Signatures								
/s/ Timothy J. Barker	09/10/2013							

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).
- The price reported is a weighted average sale price. The sale prices ranged from \$21.12 to \$21.47. Reporting Person provided Issuer full
 (1) information regarding the number of shares sold at each separate price. Issuer will provide, upon receipt of a request, a copy of this information to the SEC staff or a security holder of the Issuer.
- (2) 1/16th of the shares subject to the option vested and became exercisable on April 1, 2008 and 1/16th of the shares subject to the option vest and become exercisable on the first day of each calendar quarter thereafter.

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.

<u>**</u>Signature of Reporting Person