Edgar Filing: MASSEY ANN - Form 4

| MASSEY A | NN | | | | | | | | | | |
|--|-------------------------------------|---|---|---------------------------|---|---|-----------|---|--|------------------------|--|
| Form 4 February 26, | 2019 | | | | | | | | | | |
| FORM | | | | | | | | | | PPROVAL | |
| | UNITEL | STATES | | | ND EX(D.C. 20 | | NGE | COMMISSION | OMB Number: | 3235-0287 | |
| Check th if no long subject to Section 1 | F CHAN | CHANGES IN BENEFICIAL OWNERSHIP (SECURITIES | | | | | | Expires: January 31, 2005 Estimated average burden hours per | | | |
| Form 4 o Form 5 obligation may cont <i>See</i> Instru 1(b). | Filed pu ns Section 17 inue. | (a) of the | | ility Hold | ling Com | ipany | Act o | ge Act of 1934, ff 1935 or Sectio 40 | response | 0.5 | |
| (Print or Type I | Responses) | | | | | | | | | | |
| 1. Name and Address of Reporting Person <u>*</u> MASSEY ANN | | | 2. Issuer Name and Ticker or Trading Symbol Majesco [MJCO] | | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| (Last) C/O MAJES AVE., SUIT | 5CO, 412 MT. F | (Middle) KEMBLE | U | Earliest Tr ay/Year) | | | | Director X Officer (give below) | | b Owner er (specify | |
| | | | | ndment, Da th/Day/Year | te Original | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| MORRISTO | OWN, NJ 07960 | 1 | | | | | | Form filed by M Person | More than One Ro | eporting | |
| (City) | (State) | (Zip) | Table | e I - Non-D | erivative S | Securi | ties Ac | quired, Disposed o | f, or Beneficia | lly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Da (Month/Day/Yea | r) Execution any | | Code (Instr. 8) | 4. Securi onAcquired Disposed (Instr. 3, | d (A) of d of (D 4 and (A) or |)) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | |
| Common Stock | 02/25/2019 | | | X | 4,333 | A | \$ 7.1 | 30,334 | 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) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transactio Code (Instr. 8) | 5. Number of 5. Number of 5. Securities 6. Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount Underlying Securiti (Instr. 3 and 4) | | | |
|---|---|--|---|--|--|--------|--|--------------------|--|-----------------------------------|--|--|
| | | | | Code V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amou or Numb of Share | | |
| Subscription Rights (right to buy) | \$ 7.1 | 02/25/2019 | | Х | | 26,001 | 02/05/2019 | 02/25/2019 | Common Stock | 4,33 | | |
| Reporting Owners | | | | | | | | | | | | |
| Repor | Director | Relationships or 10% Owner Officer | | | | other | | | | | | |
| MARCIEX ANNI | | | Director | 10% Owi | lei | Office | | ulci | | | | |

Sr. Vice

Finance

President of

MASSEY ANN C/O MAJESCO 412 MT. KEMBLE AVE., SUITE 110C MORRISTOWN, NJ 07960

Signatures

/s/ Lori Stanley as Attorney-In-Fact For Ann F. 02/26/2019 Massey **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). **

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.

Date