Edgar Filing: Minahan Timothy A. - Form 4

Minahan Tir	nothy A.											
Form 4												
January 03, 2	2019											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB AF	OMB APPROVAL			
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMMISSION	OMB Number:	3235-0287 January 31,		
Check th												
if no longer subject to STATEMENT OF CHANGES					ES IN BENEFICIAL OWNERSHIP OF				Expires: 20 Estimated average			
Section 1		SECURITIES							burden hours per			
Form 4 o									response 0.5			
Form 5 obligatio	n c 1						U	Act of 1934,				
may cont				•	•	· ·	•	1935 or Section	1			
<i>See</i> Instruction 1(b).	uction	30(h) of	the Inv	estment	Compar	iy Ac	ct of 1940	J				
(Print or Type I	Responses)											
1. Name and Address of Reporting Person * Minahan Timothy A.2. Issuer Name and Ticker or Trading Symbol5. Relationship of Issuer					•	Reporting Person(s) to						
				IX SYSTEMS INC [CTXS]				(Chaole all and list has)				
				Earliest Tr	ansaction			(Check	(Check all applicable)			
				Day/Year)				Director 10% Owner				
C/O CITRIX SYSTEMS, INC., 851 01/02/2019X_Of						_X_Officer (give	title Othe below)	r (specify				
WEST CYPRESS CREEK ROAD EVP Busine							ess Strategy &	СМО				
	(Street)	4.	If Amen	dment. Da	te Origina	1		6. Individual or Joi	nt/Group Filin	g(Check		
. , ,				onth/Day/Year)				Applicable Line)				
								X Form filed by O				
FORT LAU	DERDALE, FL	33309						Form filed by M Person	ore than One Rej	porting		
(City)	(State)	(Zip)	Table	I - Non-D	erivative	Secur	ities Acqu	iired, Disposed of,	or Beneficiall	y Owned		
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deem (Month/Day/Year) Execution any (Month/D		n Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)			d of (D)	5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
						(A) or		Reported Transaction(s) (Instr. 3 and 4)	(Instr. 4)			
~			(Code V		(D)	Price	(msu. 3 anu 4)				
Common Stock	01/02/2019			S	1,836 (1)	D	\$ 100.55	46,074.059	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)

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. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Minahan Timothy A. C/O CITRIX SYSTEMS, INC. 851 WEST CYPRESS CREEK ROAD FORT LAUDERDALE, FL 33309			EVP Business Strategy & CMO				
Signatures							
/s/ Antonio G. Gomes, Attorney-in-Fact for ' Minahan	Timothy A.	01/	03/2019				

**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).

(1) The sales reported in this Form 4 were made pursuant to a Rule 10b5-1 plan adopted by the Reporting Person on February 15, 2018.

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