Edgar Filing: WMS INDUSTRIES INC /DE/ - Form 4

WMS INDUS Form 4 October 18, 2	STRIES INC /DE	/									
FORM	Л							OMB AI	PROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287		
Check this box							Expires:	January 31,			
subject to	subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF								2005 average		
Section 16 Form 4 or	Section 16. SECURITIES							burden hours per response 0.4			
Form 4 or Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,									0.5		
obligation may contin <i>See</i> Instruct 1(b).	s Section 17(a) of the Publ		ling Com	pany	Act of	f 1935 or Section	n			
(Print or Type R	esponses)										
Siller Bobby Symb			S INDUSTRIES INC /DE/				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Month/Da			eate of Earliest Tr onth/Day/Year)	ansaction			X_ Director 10% Owner Officer (give title Other (specify below) below)				
800 S. NORTHPOINT BLVD 10/18/20			18/2013	2013							
			Amendment, Da	-			6. Individual or Joint/Group Filing(Check				
WAUKEGA	N, IL 60085	File	d(Month/Day/Year)			Applicable Line) _X_ Form filed by O Form filed by M Person				
(City)	(State) (Z	Zip)	Table I - Non-D)erivative S	ecurit	ies Aco	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Dat any	3. 4. Securities Acquired e, if Transaction(A) or Disposed of Code (D) Year) (Instr. 8) (Instr. 3, 4 and 5) (A) or		5. Amount of	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of				
Common Stock	10/18/2013		Code V D	Amount 12,478 (1)	(D) D	Price \$26		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. Number onof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. H Der Sec (In:
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option	\$ 20.05	10/18/2013		D	8,813	(2)	09/15/2018	Common Stock	8,813	\$

Edgar Filing: WMS INDUSTRIES INC /DE/ - Form 4

Reporting Owners

Reporting Owner Name / Address	Relationships						
Toporting of the round , round as	Director	10% Owner	Officer	Other			
Siller Bobby 800 S. NORTHPOINT BLVD WAUKEGAN, IL 60085	X						
Signatures							
/s/ Bobby L. 10 Siller	/18/2013						
<u>**</u> Signature of	Date						

<u>**</u>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) Represents shares of common stock that were cancelled and converted into the right to receive \$26.00 per share pursuant to the merger agreement between Issuer and Scientific Games Corporation (the "Merger Agreement").
- (2) This option was cancelled and converted pursuant to the Merger Agreement into the right to receive a cash payment equal to \$26.00 per share minus the exercise price, multiplied by the number of options.

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.