### Edgar Filing: TOTAL SYSTEM SERVICES INC - Form 4

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TOTAL SYSTEM SE Form 4	RVICES INC										
August 02, 2013											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287		
Check this box	x STATEMENT OF CHANGES IN BENEFICIAL OWN SECURITIES							Expires:	January 31,		
Section 16. Form 4 or								Estimated average burden hours per response 0.			
Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940											
(Print or Type Responses)											
1. Name and Address of F PAGE H LYNN	Symbol	•				5. Relationship of Reporting Person(s) to Issuer					
	[TSS]	TOTAL SYSTEM SERVICES INC [TSS]					(Check all applicable)				
	(First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year)					X_ Director10% Owner Officer (give titleOther (specify below)below)					
P. O. BOX 2567		08/02/2013					0010 (())	0010 (()			
(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 Earm filed by More than One Person						
COLUMBUS, GA 31902-2567 Form filed by More than One Reporting Person											
(City) (State)	(City) (State) (Zip) <b>Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned</b>										
	any	Execution Date, if Transaction(A) or Disposed of				d of	Securities Beneficially	SecuritiesForm: DirectIndirectBeneficially(D) orBeneficialOwnedIndirect (I)OwnershipFollowing(Instr. 4)(Instr. 4)ReportedFransaction(s)			
Common				Amount	(D)	Price \$			Family		
Stock 08/02/2	013	S		5,000	D	ф 28.3	161,000	Ι	Trust 2		
Common 07/24/2 Stock	013	G	V	1,100	D	\$0	38,476	D			
Common Stock							28,636	I	By Spouse		
Common Stock							10,000	I	Family Trust 1		
Common Stock							150,000	I	GRAT 4 24 2013		

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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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration		or		
						Exercisable	Date		Number		
									of		
				Code V	(A) (D)				Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
PAGE H LYNN P. O. BOX 2567 COLUMBUS, GA 31902-2567	Х							
Signatures								
Garilou Page, Attorney-in-Fact	08/02/2013							

Date

\*\*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.