Edgar Filing: Scoglio David Michael - Form 4

| Scoglio David | d Michael | | | | | | | | |
|--|---|---|--|---|---|--|--|---|--|
| Form 4 | | | | | | | | | |
| January 13, 2 | 011 | | | | | | | | |
| FORM | FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSIO | | | | | | | PPROVAL | |
| | UNITED S. | | ITIES AN hington, l | | | COMMISSION | OMB Number: | 3235-0287 | |
| Check this if no longe | | | | | | | Expires: | January 31 | |
| subject to Section 16 Form 4 or | 51 A I EIVIE 5. | | F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES | | | | Extimated average burden hours per response 0 | | |
| Form 5 obligation may contin <i>See</i> Instruct 1(b). | s Section 17(a) | ant to Section 16 of the Public Uti 30(h) of the Inv | lity Holdi | ng Comp | bany Act o | of 1935 or Sectio | | 0.0 | |
| (Print or Type R | esponses) | | | | | | | | |
| 1. Name and Ac Scoglio Davi | Symbol | 2. Issuer Name and Ticker or Trading Symbol ASURE SOFTWARE INC [ASUR] | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| (Last) | (First) (Mi | | | | | (Check all applicable) | | | |
| 1904 JADEV | (Month/Da | 3. Date of Earliest Transaction(Month/Day/Year)01/12/2011 | | | | Director 10% Owner X Officer (give title Other (specify below) below) Chief Financial Officer | | | |
| | (Street) 4. If Ame Filed(Mon | | | e Original | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| MORRISVII | LLE, NC 27560 | | | | | Form filed by M Person | | | |
| (City) | (State) (Z | ip) Table | I - Non-De | rivative Se | ecurities Ac | quired, Disposed of | f, or Beneficial | lly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transactio Code (Instr. 8) | 4. Securit nAcquired Disposed (Instr. 3, 4 | (A) or of (D) 4 and 5) (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) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| Asure Software, Inc. Common Stock | | | Code V | Amount | (D) Price | | D | | |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 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 orDerivative 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) | |
|---|---|---|---|--|--|--|--------------------|---|-------------------------------------|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares |
| Employee Stock Option, (right to buy) | \$ 3.5 | 01/12/2011 | | A | 32,000 | <u>(1)</u> | 01/12/2016 | Asure Software, Inc. Common Stock | 32,000 |

Reporting Owners

| Reporting Owner Name / Address | | Relationships | | |
|---|----------|---------------|-------------------------|-------|
| reporting o when reality real cost | Director | 10% Owner | Officer | Other |
| Scoglio David Michael 1904 JADEWOOD DRIVE MORRISVILLE, NC 27560 | | | Chief Financial Officer | |

Signatures

David M Scoglio 01/13/2011 <u>**</u>Signature of Date 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) These options shall vest 25% after twelve months and another 25% every 12 months thereafter. They have a term of 5 years.
- (2) The exercise price is \$3.50.
- (3) The first 15000 options vest over a 3 year schedule with 1/3 vesting after the first year and each additional third vesting every 12 months thereafter. They have a term of 10 years.

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.