Edgar Filing: ALLIANCE DATA SYSTEMS CORP - Form 4

ALLIANCE DATA SYSTEMS CORP

Form 4

February 06, 2003

SEC Form 4

FORM 4	I OIMI I					CURITIES AND EXCHANGE					
		(COMMISS	ION							
[] Check this box if no longe subject to Section 16. Form 4		Wa	ashington, D.C	. 20549							
or Form 5 obligations may continue. See Instruction 1(b).	STA	ATEMENT OF CHA	ANGES IN B	ENEFICIAL OW	OMB Number: 3235-0287 Expires: January 31, 2005 Estimated average burden						
	Filed	l pursua	ant to Section 16(a) of th	ne Securities Ex	change Act of 1934	hours per response 0.5					
(Print or Type Responses)				Public Utili	ty						
Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940											
1. Name and Address of Reporting 2. Issuer Name and Ticker or Person*			Trading Symbol	l	6. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Szeftel, Ivan M.		Allian	ce Data Systems Corpo	oration ADS							
(Last) (First)			S. Identification nber of Reporting	4. Statement Month/Day		Director 10% Owner X Officer Other					
(Middle)			son, if an entity	Wionui/Da	y/ 1 cai	Executive Vice President and President,					
17655 Waterview Parkway		(voluntary)		February	06, 2003	Retail Credit Servio	ees				
						7. Individual or Joint/Group Filing (Check Applicable					
(Street)						Line)					
(Street) Dallas, TX 75252-012				5. If Amendment, Date of Original							
				(Month/Da	_	 Form filed by One Reporting Person Form filed by More than One Reporting Person 					
(City) (State)											
(Zip)											
Table I - Non-Derivative S	ecurities	Acanin	red. Disposed of, or Re	 neficially Own	ed	1					
	nsaction 1		2A. Deemed	·	4. Securities Acqui	red 5. Amount of	6. Owner-	7. Nature of			
(Instr. 3) (Month/Day		/Day/Year) Execution		Code	(A) or Disposed (D) Securities	ship	Indirect			
			Date, if any	and Voluntary	Of	Beneficially Owned	Form: Direct(D)	Beneficial Ownership			
			(Month/Day/Year)	Code	(Instr. 3, 4, and 5	Following	or	1			
				(Instr. 8)		Reported Transaction(s)	Indirect (I)	(Instr. 4)			
						Transaction(s)	(Instr. 4)				
						(Instr. 3 and 4)					
				Code V	Amount						
					A/D Pri	ce					
Common						36000 (1) D				
						·					
Reminder: Report on a separat	te line for	each cl	lass of securities	Persons who	respond to the collec	ction of information co	ontained	1			
beneficially owned directly or	indirectly	/ .			in this form are n	ot required to		(over)			
* If the form is filed by more t Instruction 4(b)(v).	eportin	g person, see	respond unles	s the form displays a numb	SEC 1474 (9-02)						

Szeftel, Ivan M. - February 06, 2003

Form 4 (continued)

Table I		Acquired, Disp ants, options, c	,	wned						
1. Title of Derivative	2. Conversion or	 3A. Deemed Execution	4. Transaction	5. Number of	6. Date Exercisable(DE) and	7. Title and Amount of	8. Price of	9. Number of Derivative	10. Owner-	11. Nature of Indirect

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Security (Instr. 3)	Exercise Price of Deri- vative Security	Date (Month/ Day/ Year)	Date, if any (Month/ Day/ Year)	Code and Voluntary (V) Code (Instr.8)	Derivative Securities Acquired (A) or Disposed (D) Of (Instr. 3,4 and 5)	(Month/Day/Year)	Underlying Securities (Instr. 3 and 4)	Derivative Security (Instr.5)	Beneficially Owned Following	ship Form of Deriv- ative Security: Direct (D) or Indirect (I) (Instr.4)	Beneficial Ownership (Instr.4)
Employee Stock Option (right to buy)	\$9.00					Varies (2) 07/24/2008	Common - 111,111		111,111	D	
Employee Stock Option (right to buy)	\$9.90					Varies (3) 05/06/2009	Common - 22,222		22,222	D	
Employee Stock Option (right to buy)	\$15.00					Varies (4) 08/31/2010	Common - 80,000		80,000	D	
Employee Stock Option (right to buy)	\$12.00					Varies (5) 06/08/2011	Common - 38,048		38,048	D	

Explanation of Responses:

** 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.

By: Attorney-in-Fact for

** Signature of Reporting Person
Date

Power of Attorney

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