## FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

<b>STATEMENT</b>	OF CHANGES	IN BENEFICIAL	<b>OWNERSHIP</b>

**OMB APPROVAL** 3235-0287 Estimated average burden hours per response: 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>Bianchi Juan</u>					2. Issuer Name and Ticker or Trading Symbol EURONET WORLDWIDE INC [ EEFT ]										ck all applic Directo	tionship of Reporting all applicable) Director Officer (give title		on(s) to Iss 10% Ov Other (s	wner	
(Last) (First) (Middle) C/O EURONET WORLDWIDE, INC. 3500 COLLEGE BOULEVARD					3. Date of Earliest Transaction (Month/Day/Year) 06/13/2017										below)		Transf	below)		
(Street)	OD K	S	66211		4. If Amendment, Date of 0				e of Ori	of Original Filed (Month/Day/Year)						Form fi	led by One	Filing (Check Applications Reporting Person e than One Reporting		n
(City)	(S	itate)	(Zip)																	
1 Title of	Security (Inc		ble I - No	n-Deriv		_	2A. De		Cqui		Dis	4. Securition				Owned 5. Amou	nt of	6 Ov	nership	7. Nature of
Date			Date	h/Day/Year)		Execution Date,		te, T	e, Transaction Code (Instr.		Disposed Of (D) (Instr. 3, 4			) Securitie Beneficia Owned F	Securities Beneficially Owned Following	Form: Direct (D) or Indirect (I) (Instr. 4)	: Direct r Indirect str. 4)	Indirect Beneficial Ownership		
								c	Code	v	Amount	(A) (D)	or F	rice	Reported Transact (Instr. 3 a	ion(s)			(Instr. 4)	
Common Stock, par value \$0.02 per share			06/13	3/2017					M		4,245	A	.	\$17.55	9,5	534 D		D		
Common Stock, par value \$0.02 per share			06/13	5/13/2017					М		8,592	A	.	\$56.24	18,	18,126		D		
Common Stock, par value \$0.02 per share			06/13	3/2017					S		12,837	΄ [	:	\$88.01	5,2	289		D		
Common Stock, par value \$0.02 per share 06			06/13	3/2017					S		3,763	1	:	\$88.01		,526		D		
Common Stock, par value \$0.02 per share 06/14			/201	/2017				S		1,526	Ι		\$88		0		D			
			Table II -									osed of, onvertib				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date, T	ransaction Code (Instr.				Expira	6. Date Exercisal Expiration Date (Month/Day/Year			7. Title and Amount of Securities Underlying Derivative Sec (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerc	cisable	Ex Da	piration te	Title	or Ni of	ımber					
Stock Option (right to buy)	\$17.55	06/13/2017			М			4,245	(	(1)	08	/15/2022 <sup>(1)</sup>	Commo Stock	n 4	,245	\$0	13,850	0	D	
Employee Stock Option	\$56.24	06/13/2017			м			8 592		(2)		2/10/2024	Commo	n 8	.592	\$0	12 88'	7	D	

## **Explanation of Responses:**

- $1. \ The option vests with respect to 20\% of the shares beginning on August 15, 2013 and 20\% each anniversary thereafter.$
- $2. \ The option vests with respect to 20\% of the shares on December 10, 2015 and 20\% each anniversary thereafter through December 10, 2019.$

## Remarks:

(right to

/s/ By Jeffrey B. Newman, Attorney in Fact for Juan C.

06/15/2017

Bianchi

Stock

\*\* Signature of Reporting Person

Date

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

\* 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.

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 Number.