FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF	CHAI	NGES

OMB APPROVAL

OMB Number: 3235-

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

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* PARKINSON ANTHONY J						2. Issuer Name and Ticker or Trading Symbol TRANSACTION SYSTEMS ARCHITECTS INC [TSAI]									Check	tionship of Reportin all applicable) Director Officer (give title		10	o Issuer % Owner er (specify	wner
(Last) (First) (Middle) 224 S. 108 AVENUE				3. Date of Earliest Transaction (Month/Day/Year) 09/19/2003									X	belov		be	ow)			
(Street) OMAHA NE 68154 (City) (State) (Zip)					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								. Indiv ine) X						
		Tabl	e I - Noi	n-Deriv	ative S	Secu	ıritie	s Acc	uired,	Dis	posed o	f, o	r Ben	efici	ally (Owne	ed			
				Date	Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed (Code (Instr. 5)		ties Acquired (A) d Of (D) (Instr. 3, 4			4 and Sed Bei Ow		ount of ties cially d Following	6. Ownershi Form: Direc (D) or Indire (I) (Instr. 4)	of Indirect Beneficial	of Indirect Beneficial Ownership	
								Code	v	Amount		(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)			(11150.4)	(11311. 4)	
Common Stock				09/19	9/2003				S		5,000		D	\$17	.41	5,000		D		
		Та									sed of, onvertib				y Ov	vned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date,	4. Transacti Code (Ins		5. Nur of Deriva Secur Acqui (A) or Dispo of (D) (Instr. and 5	ative ities red sed 3, 4	6. Date E. Expiratio (Month/D	n Date	9	Am Sec Und Der	Am	str. 3 ount mber			9. Number of derivative Securities Beneficially Owned Following Reported Transactions (Instr. 4)	Ownersi Form: Direct (D or Indire (I) (Instr.	Beneficial Ownership (Instr. 4)	

Explanation of Responses:

Anthony J Parkinson

09/22/2003

** 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.