FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
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| | | |

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPRO | VAL |
|------------------------|-----------|
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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* ZILVITIS PATRICK J | | | | | | 2. Issuer Name and Ticker or Trading Symbol ANSYS INC [ANSS] | | | | | | | | | heck al | nship of Repo I applicable) Director | rting F | Person(s) to Is | | |
|---|--|--------|------|--|--|--|---|---|--------|--------------------------------------|---|---|---|-------|--|--|-----------------|---|---|--|
| | 2600 ANSYS DRIVE | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/15/2015 | | | | | | | | | Officer (give ti below) | cer (give title | | Other (specify below) | |
| SOUTHPOINTE (Street) CANONSBURG PA 15317 | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) | (St | ate) (| Zip) | | | | | | | | | | | | | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| Date | | | | | n/Day/Year) i | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Code (| Transaction Disposed Code (Instr. 5) | | ties Acquired (A d Of (D) (Instr. 3, | | | id So | ecurities I | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | Code | v | Amount | (A (1 | A) or D) | Price | Tr | Transaction(s) (Instr. 3 and 4) | | | (| |
| Common Stock ⁽¹⁾ 05/15 | | | | | 15/2015 | | | | A | | 1,400 |) A S | | \$0 | \$0 43,000(2) | | | D | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Conversion or Exercise Price of Derivative Security (Instr. 3) 2. Conversion Date Execution Date (Month/Day/Year) Date (Month/Day/Year) 3. Transaction Date Execution Date, if any (Month/Day/Year) (Month/Day/Year) 4. Transaction Execution Date, if any (Month/Day/Year) Code (Month/Day/Year) | | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of Title Shares | | ount | 8. Price Derivat Securit (Instr. § | derivativ Securitie Securitie Beneficia Owned Followin Reported | Following Reported Transaction(s) | | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | | |

Explanation of Responses:

1. Represents Deferred Stock Units ("DSUs") issued under the Fourth Amended and Restated ANSYS, Inc. 1996 Stock Option and Grant Plan in accordance with the 12/31/14 annual grant election of the Chairman and non-affiliated independent directors. Each DSU is settled solely for one share of Common Stock upon termination of services as a Director. The grant of 1,400 DSUs is made quarterly in arrears and is fully vested at grant date.

2. Includes 41,000 Deferred Stock Units

Remarks:

Colleen Zak Hess, Attorney-in **Fact**

05/19/2015

** 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.