FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL | | | | | | | | | | |
|----------------------|-----------|--|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | | |
| Estimated average bu | ırden | | | | | | | | | |

0.5

hours per response:

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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>ESQUIVEL FERNANDO</u> | | | | | 2. Issuer Name and Ticker or Trading Symbol ANSYS INC [ANSS] | | | | | | | | | ck all applic Directo | cable) or | g Pers | ion(s) to Issu | ner | |
|---|---|--|--|---------------------|--|---|-------------------------------------|-------|---|---|--------------------|---|--|--------------------------|---|---|---|--|--|
| (Last) 2600 AN | (F ISYS DRIV | , | (Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/31/2016 | | | | | | | | X | below) | | I RES | Other (s below) | |
| (Street) CANON (City) | SBURG PA | | 15317 (Zip) | | 4. 1 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | Line) | ndividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| | | Tab | le I - Noi | n-Deri | vativ | e Se | curities | s Acc | quired, | Dis | osed o | f, or Be | nefi | cially | y Owned | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | ear) | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Transaction Disp Code (Instr. 5) | | Disposed | urities Acquired (A) sed Of (D) (Instr. 3, 4 | | | 5. Amou Securitie Beneficia Owned F Reported | es ally Following | Form | : Direct Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | Code | v | Amount | (A) o (D) | r P | rice | Transact | nsaction(s) tr. 3 and 4) | | | (11150.4) |
| Common Stock ⁽¹⁾ 05/3 | | | 1/201 | .6 | | | A | | 4,000 | (1) A | | \$ <mark>0</mark> | 4,000(2) | | D | | | | |
| | | - | Table II - | | | | | | | | | or Ben | | | Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution D if any (Month/Day/ | Date, Trans Code | | | of | | 6. Date Exercisable an Expiration Date (Month/Day/Year) | | | 7. Title an of Securit Underlyin Derivative (Instr. 3 a | ies g Secu | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | e s ally g | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Co | Code | de V | (A) | | Date Exercisab | | expiration Date | Title | Amo or Nun of Sha | nber | | | | | |
| Option To | \$89.1 | 05/31/2016 | | | A | | 10,000 | | (3) | 0 | 5/31/2016 | Common | 10, | 000 | \$0 | 10,000 |) | D | |

Explanation of Responses:

- 1. Represents Restricted Stock Units ("RSUs") issued under the Issuer's Fifth Amended and Restated 1996 Stock Option and Grant Plan. The Restricted Stock Units vest 25% annually in equal installments beginning on the first anniversary of the grant date.
- 2. Includes 4,000 Restricted Stock Units.
- 3. The option grant of 10,000 shares granted on 05/31/2016 vests 25% annually in equal installments beginning on the first anniversary of the grant.

Remarks:

Sheila S. DiNardo Attorney-in-Fact 06/02/2016

** 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.