FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL								
OMB Number:	B Number: 3235-0104							
Estimated average burden								
hours per response	e: 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*  Kelly Laura G.  2. Date of Event Requiring Statement (Month/Day/Year) 09/10/2013			nent	3. Issuer Name and Ticker or Trading Symbol HENRY JACK & ASSOCIATES INC [ JKHY ]								
(Last) 201 MARIN I	(First) BLVD #1008	(Middle)			Relationship of Reporting Pers (Check all applicable)     X Director		son(s) to Issuer		5. If Amendment, Date of Original Filed (Month/Day/Year)			
(Street) JERSEY CITY (City)	NJ (State)	07302 (Zip)				Officer (give title below)	Other (spe below)	cify		cable Line) Form filed by	/Group Filing (Check y One Reporting Person y More than One erson	
Table I - Non-Derivative Securities Beneficially Owned												
1. Title of Security (Instr. 4)					2. Amount of Securities Beneficially Owned (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Common Stock					439 D							
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)												
1. Title of Derivative Security (Instr. 4)  2. Date Exercisable a Expiration Date (Month/Day/Year)			ate	3. Title and Amount of Secu Underlying Derivative Secur		ity (Instr. 4) Conve		rcise Form:		6. Nature of Indirect Beneficial Ownership (Instr. 5)		
			Date Exercisable	Expiratio Date	n Title	Đ	Amount or Number of Shares	Price of Derivation Securi	tive	Direct (D) or Indirect (I) (Instr. 5)		

Explanation of Responses:

LAURA G KELLY

09/17/2013

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  If the form is filed by more than one reporting person, see Instruction 5 (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.