

EGAIN Corp  
Form 3  
May 20, 2013

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

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**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,  
Section 17(a) of the Public Utility Holding Company Act of 1935 or Section  
30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *			2. Date of Event Requiring Statement	3. Issuer Name <b>and</b> Ticker or Trading Symbol	
Â FW PRIVATE INVESTMENTS, L.P.  (Last) (First) (Middle)			(Month/Day/Year) 05/09/2013	EGAIN Corp [EGAN]	
201 MAIN STREET, Â SUITE 2300  (Street)			4. Relationship of Reporting Person(s) to Issuer  (Check all applicable)		5. If Amendment, Date Original Filed(Month/Day/Year)
FORT WORTH, Â TX Â 76102  (City) (State) (Zip)			___ Director ___ 10% Owner ___ Officer ___X___ Other (give title below) (specify below) See Remarks		6. Individual or Joint/Group Filing(Check Applicable Line) ___ Form filed by One Reporting Person ___X___ Form filed by More than One Reporting Person

**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	346,713	D <sup>(1)</sup>	Â

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

SEC 1473 (7-02)

**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 control number.**

**Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative	5. Ownership Form of Derivative Security:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
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Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Security	Direct (D) or Indirect (I) (Instr. 5)
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## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
FW PRIVATE INVESTMENTS, L.P. 201 MAIN STREET SUITE 2300 FORT WORTH, TX 76102	^	^	^	See Remarks
FW INVESTMENT GENPAR, L.P. 201 MAIN STREET SUITE 2300 FORT WORTH, TX 76102	^	^	^	See Remarks
FW INVESTMENT GENPAR MGP, LLC 201 MAIN STREET SUITE 2300 FORT WORTH, TX 76102	^	^	^	See Remarks

## Signatures

FW PRIVATE INVESTMENTS, L.P., By: FW INVESTMENT GENPAR, L.P., its general partner, By: FW INVESTMENT GENPAR MGP, LLC, its general partner, By: /s/ Kevin G. Levy, Vice President 05/20/2013

\*\*Signature of Reporting Person Date

FW INVESTMENT GENPAR, L.P., By: FW INVESTMENT GENPAR MGP, LLC, its general partner, By: /s/ Kevin G. Levy, Vice President 05/20/2013

\*\*Signature of Reporting Person Date

FW INVESTMENT GENPAR MGP, LLC, By: /s/ Kevin G. Levy, Vice President 05/20/2013

\*\*Signature of Reporting Person Date

## Explanation of Responses:

- \* 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).
- (1) FW Private Investments, L.P. ("FWPI") is the direct beneficial owner of the shares of the Issuer's Common Stock reported in this line. FW Investment Genpar, L.P. ("FWI Genpar") does not have a direct beneficial interest in the Issuer's Common Stock and is reporting solely in its capacity as the general partner of FWPI. FW Investment Genpar MGP, LLC does not have a direct beneficial interest in the Issuer's Common Stock and is reporting solely in its capacity as the general partner of FWI Genpar.

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### Remarks:

The Reporting Persons beneficially own less than 10% of the outstanding securities of the Issuer, a b

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, See Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.