FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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 Ad Goepel Pa	•	2. Date of Event Requiring Stater (Month/Day/Yea	ment	3. Issuer Name and Ticker or Trading Symbol FORGENT NETWORKS INC [ASUR]						
(Last) 16 ABBOTTS (Street) SUDBURY (City)	(First) SWOOD MA (State)		08/28/2009			tionship of Reporting Pers all applicable) Director Officer (give title below)	on(s) to Issu 10% Own Other (spe below)	er 6	Individual or Join pplicable Line) X Form filed b Person	oate of Original Filed out/Group Filing (Check out/Group Filing (Chec
Table I - Non-Derivative Securities Beneficially Owned										
1. Title of Security (Instr. 4)						ally Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)	
Common Stock (\$.01 par value)						121,837	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 Expiration Date (Month/Day/Year) Date Expiration Date Expiration Date (Month/Day/Year)			ite	3. Title and Amount of Underlying Derivative 4)			4. Conversion or	Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
			1	Expiration Date	Title		Amount or Number of Shares	Exercise Price of Derivative Security	Direct (D) or Indirect (I) (Instr. 5)	

Explanation of Responses:

Pat Goepel

09/11/2009

** 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 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.