SYSTEMAX INC Form 4 June 10, 2014

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL

OMB 3235-0287 Number:

January 31, Expires: 2005

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Check this box if no longer subject to Section 16. Form 4 or Form 5

obligations

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 may continue. 30(h) of the Investment Company Act of 1940

1(b).

(City)

(Print or Type Responses)

See Instruction

1. Name and Address of Reporting Person * DICK STACY S		g Person *	2. Issuer Name and Ticker or Trading Symbol SYSTEMAX INC [SYX]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)		
(Last) C/O SYSTEM HARBOR PAI	AX INC., 11	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 06/09/2014	_X_ Director 10% Owner Officer (give title below) Other (specify below)		
	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person		
PORT WASH	INGTON, N	Y 11050		Form filed by More than One Reporting Person		

(State)

(Zip)

(- 3)	(******)	1 abie	: 1 - Non-De	erivative S	ecuri	ties Ac	quirea, Disposea	oi, or Beneficia	lly Ownea
1.Title of	2. Transaction Date	2A. Deemed	3.	4. Securit	ties		5. Amount of	6. Ownership	7. Nature of
Security	(Month/Day/Year)	Execution Date, if	Transactio	nAcquired	(A) o	r	Securities	Form: Direct	Indirect
(Instr. 3)		any	Code	Disposed	of (D)	Beneficially	(D) or	Beneficial
		(Month/Day/Year)	(Instr. 8)	(Instr. 3,	4 and	5)	Owned	Indirect (I)	Ownership
							Following	(Instr. 4)	(Instr. 4)
					(4)		Reported		
					(A)		Transaction(s)		
			Code V	Amount	or (D)	Price	(Instr. 3 and 4)		
Common Stock (1)	06/09/2014		A	2,538	A	\$0	34,096	D	

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

Table I. New Desiration Committee Assuring Disposed of an Desirable On

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D)		ate	7. Title Amoun Underly Securiti (Instr. 3	t of ying es	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr
				Code V	(Instr. 3, 4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title N	Amount or Number of Shares		

Reporting Owners

$\mathbf{p}_{\mathbf{A}}$	atian	ships
Nei	auoi	BILLUS

Reporting Owner Name / Address

Director 10%
Owner Officer Other

DICK STACY S
C/O SYSTEMAX INC., 11 HARBOR PARK DRIVE
Y
PORT WASHINGTON, NY 11050

Signatures

/s/ Stacy S. Dick by April Gruder,
Attorney-in-Fact

06/10/2014

**Signature of Reporting Person Date

Explanation of Responses:

- * 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).

On June 9. 2014, the reporting person received 2,538 shares of restricted stock units pursuant to the Company's 2006 Stock Incentive Plan For Non-Employee Directors. Pursuant to the plan, such number of restricted stock units was determined by dividing \$40,000 by the closing price per share during the 20 trading days preceding the date of such meeting (rounded up to the nearest whole number of shares). Such shares are generally subject to forfeiture if the holder is not a director of the Company on the second anniversary of grant, and can not be sold while so restricted; such restrictions lapse if the holder dies or becomes disabled or there is a change of control, as defined in the plan

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.

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