FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
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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 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

| (Print or Ty | pe Response | s) | | | | | | | | | | | | | | | | | | |
|---|-------------|------------------|----------------------------------|---|--|-----|---|--------|---|-------------------------------------|---|--|---|--|--|--|--|--|-----------------------|--|
| 1. Name and Address of Reporting Person * VESEY MICHAEL | | | | 2. Issuer Name and Ticker or Trading Symbol Wayside Technology Group, Inc. [WSTG] | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner | | | | | | | | | |
| (Last) (First) (Middle) 4 INDUSTRIAL WAY WEST, SUITE 300 | | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/05/2020 | | | | | | | X Officer (give title below) Other (specify below) Vice President & CFO | | | | | | | | | |
| (Street) EATONTOWN, NJ 07724 | | | | 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 Form filed by More than One Reporting Person | | | | | | | | | |
| (City) | | (State) | | (Zip) | | | Т: | able I | - Non | -Der | ivative ! | Securities | s Acan | ired. D | isno | sed of, or I | Beneficially (| Owned | | |
| 1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yo | | | 2A. Deemed Execution Date, if | | Deemed ution Date, if | | 3. Transactio Code (Instr. 8) | | on 4. Securities Acquired (A) or Disposed of (D (Instr. 3, 4 and 5) | | quired of (D) | d 5. Amour Beneficia Reported | | nt of Securities ally Owned Following Transaction(s) | | 6. Ownership Form: | of In Bene | 7. Nature of Indirect Beneficial | | |
| | | | | | | ode | v | Amoun | (A) or t (D) | Price | (Instr | . 3 a | and 4) | | Direct (D) or Indirect (I) (Instr. 4) | | nership tr. 4) | | | |
| Common Stock 08/0: | | 05/2020 | | | F(1) | | | 735 | D | \$ 23.29 | 33,604 | | | D | | | | | | |
| | | | | Table II - | | | | | equire | the f | orm dis | splays a of, or Bei | curre | ently value of the contract of | alid | | spond unle trol numbe | | | |
| 1. Title of Derivative Security (Instr. 3) Conversion or Exerce Price of Derivative Security | | e (Month/Day/Yea | | 3A. Deemed Execution Da any | (e.g., puts, calls, was 4. te, if Transaction Code Year) (Instr. 8) | | 5. Number of ar (N Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | 6. Da and I (Mon | and Expiration Date Month/Day/Year) | | 7. T Ame Und Sect (Ins 4) | 7. Title and Amount of Underlying Securities (Instr. 3 an | | Derivative Security (Instr. 5) | 9. Number of Derivative Securities Beneficially Owned Following Reported Transaction ((Instr. 4) | Ownersh Form of Derivating Security Direct (I or Indire | ship of B C (I) (D) rect | Ownersh (Instr. 4) | |
| | | | | | | | | | | | | | | | UCI | | | | | |

Reporting Owners

| | | Relationships | | | | | | |
|---|--------------------|---------------|--------------|----------------------|-------|--|--|--|
| Reporting Own | ner Name / Address | Director | 10% Owner | Officer | Other | | | |
| VESEY MICI 4 INDUSTRI SUITE 300 EATONTOW | AL WAY WEST | | | Vice President & CFO | | | | |

Signatures

| /s/ Michael Vesey | 08/06/2020 |
|---------------------------------|------------|
| **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)
- (1) Shares withheld at vesting of restricted stock for purposes of meeting the reporting person's tax obligations.

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.