FORM 4

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

| OMB APPE | ROVAL |
|--------------------|-----------|
| OMB Number: | 3235-0287 |
| Estimated average | burden |
| hours per response | 0.5 |

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 | 0) | | | | | | | | | | | | | |
|--|---|---|--|---|---|--|---|--|---|---|--|---------------------------------|--|---|---|
| 1. Name and Address of Reporting Person* MEYERCORD F DUFFIELD | | | 2. Issuer Name and Ticker or Trading Symbol Wayside Technology Group, Inc. [WSTG] | | | | | 5 | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X_Director 10% Owner | | | | | | |
| (Last) (First) (Middle) C/O WAYSIDE TECHNOLOGY GROUP, 1157 SHREWSBURY AVENUE | | | ` | 3. Date of Earliest Transaction (Month/Day/Year) 05/16/2014 | | | | | | - | Officer (give | title below) | Othe | (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 Form filed by More than One Reporting Person | | | | | | |
| | SBURY, N | | (T) | | | | | | | | r onn med by . | Tore than one i | seporting reison | | |
| (Cit | y) | (State) | (Zip) | | | Table | e I - Non-D | erivativ | e Securities | s Acquir | ed, Disposed | of, or Benef | icially Owner | l | |
| (Instr. 3) Date | | 2. Transaction Date (Month/Day/Year |) any | eemed ation Date, if th/Day/Year) | e, if Cod | (Instr. 8) | | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | Transaction(s) | | l (| Ownership Form: | 7. Nature of Indirect Beneficial Ownership | |
| | | | | (WIOIII | 11/ Day/ 1 | | ode V | Amou | (A) or (D) | Price | (Instr. 3 and 4) Direct (D) Owr or Indirect (Instr. 4) | | | | |
| Common | Stock | | 05/16/2014 | | | | М | 25,00 | 0 A | \$ 8.03 | 82,875 | | I |) | |
| Reminder: | Report on a | separate line for each | n class of securities b | eneficial | lly own | d directly | Pers in thi | ns wh | are not re | quired | collection o | | | | 474 (9-02) |
| Reminder: | Report on a | separate line for eacl | | - Deriva | tive Sec | urities Ac | Persin thi a cur | ons when some some some some some some some some | are not re valid OMB | quired contro | to respond of number. | | | | 474 (9-02) |
| 1. Title of | 2. Conversion | 3. Transaction | Table II - 3A. Deemed Execution Date, if | - Deriva (e.g., pu 4. Transact Code | tive Secuts, call 5 tion of Security or of (In | urities Ac, warran Number Derivative curities quired (A Disposed (D) str. 3, 4, | Persin this a cured, Dits, options, 6. Date Expiration (Month/D | posed of convert dercisable Date | are not re valid OMB of, or Benefible securit e and | ricially Coties) 7. Title of Under Securit | to respond of number. Dwned and Amount erlying | inless the | 9. Number of Derivative Securities Beneficially Owned Following Reported | f 10. Ownershi Form of Derivativ Security: Direct (D or Indirec | 11. Nature of Indire Beneficie Ownersl (Instr. 4) |
| 1. Title of Derivative Security | 2. Conversion or Exercise Price of Derivative | 3. Transaction | Table II - 3A. Deemed Execution Date, if any | - Deriva (e.g., pu 4. Transact Code | tive Secuts, call 5 tion of Security or of (In | urities Acs, warran Number Derivative surities quired (A Disposed D) str. 3, 4, | Persin this a cured, Dits, options, 6. Date Expiration (Month/D | posed of converting the converting to the converting the convertin | are not revalid OMB of, or Benefible securite and | ricially Coties) 7. Title of Under Securit | to respond to number. Dwned and Amount erlying ies | 8. Price of Derivative Security | 9. Number of Derivative Securities Beneficially Owned Following | f 10. Ownershi Form of Derivativ Security: Direct (D or Indirec | 11. Nature of Indire Beneficie Ownersl (Instr. 4) |

Reporting Owners

| | Relationships | | | | |
|--|---------------|--------------|---------|-------|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | |
| MEYERCORD F DUFFIELD C/O WAYSIDE TECHNOLOGY GROUP 1157 SHREWSBURY AVENUE SHREWSBURY, NJ 07702 | X | | | | |

Signatures

| /s/ F. Duffield Meyercord | 05/20/2014 |
|---------------------------------|------------|
| **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).

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.