FORM 4

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

OMB APPR	ROVAL
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* Boyer Mark Thomas			2. Issuer Name and Ticker or Trading Symbol Wayside Technology Group, Inc. [WSTG]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director10% Owner					
(Last) (First) (Middle) C/O WAYSIDE TECHNOLOGY GROUP, 1157 SHREWSBURY AVENUE			3. Date of Earliest Transaction (Month/Day/Year) 05/22/2014						X Officer (give title below) Other (specify below) Director						
(Street) SHREWSBURY, NJ 07702 (City) (State) (Zip)			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						
			(Zip)	Table I - Non-Derivative Securities Acqu						Acquire					
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yea		2A. Deemed Execution Date, any (Month/Day/Yea		e, if Code (Inst	ransaction	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		ired 5. f (D) O	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		neficially d	6. Ownership of Form:	7. Nature of Indirect Beneficial Ownership		
				(IVIOII			ode V	Amount	(A) or (D)	Price	or Indirect (In				
Common Stock 05/22/2014		05/22/2014			1	M	25,000	5,000 A	\$ 8.03	134,732		D			
Reminder:	Report on a s	separate line for each	n class of securities b	eneficial	lly owne	d directly	Persoi				collection of				1474 (9-02)
Reminder:	Report on a s	separate line for each		- Deriva	tive Secu	ırities Ac	Person in this a curre	form arently values	re not re lid OMB or Benef	quired to control	o respond u number.				1474 (9-02)
1. Title of	•	3. Transaction	Table II 3A. Deemed Execution Date, if	- Deriva (e.g., pt 4. Transac Code	tive Secuts, calls 5. N of I Sec or I of (Jurities Ac, warrand Jumber Derivative urities quired (A) Disposed D) ttr. 3, 4,	Person in this a curre quired, Disp ts, options, c 6. Date Exe Expiration (Month/Day	form arently values of of, onvertible are contact of the contact o	re not re lid OMB or Benef le securit	quired to control icially Otties)	orespond und number. wned and Amount orlying es	8. Price of		7 10. Ownersl Form of Derivati Security Direct (I or Indire	11. Naturinip of Indirec Beneficia Ownersh (Instr. 4)
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date	Table II 3A. Deemed Execution Date, if any	- Deriva (e.g., pt 4. Transac Code	tive Secuts, calls 5. N fin Sec or I of ((Ins)	Jurities Ac, warrant Number Derivative urities quired (A) Disposed D) str. 3, 4,	Person in this a curre quired, Disp ts, options, c 6. Date Exe Expiration (Month/Day	form arently values of the control o	re not re lid OMB or Benef le securit and	quired to control icially Ortics) 7. Title a of Unde Securition	orespond und number. wned and Amount orlying es	8. Price of Derivative Security	9. Number o Derivative Securities Beneficially Owned Following Reported	7 10. Ownersl Form of Derivati Security Direct (I or Indire	11. Natur of Indirec Beneficia Ownersh (Instr. 4)

Reporting Owners

		Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Boyer Mark Thomas C/O WAYSIDE TECHNOLOGY GROU 1157 SHREWSBURY AVENUE SHREWSBURY, NJ 07702	Y		Director			

Signatures

/s/ Mark T. Boyer	05/23/2014
**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.