Kipe David Form 5 January 22, 2019

C/O SYSTEMAX INC., 11

HARBOR PARK DRIVE

(City)

OMB APPROVAL FORM 5 **OMB** UNITED STATES SECURITIES AND EXCHANGE COMMISSION 3235-0362 Number: Washington, D.C. 20549 Check this box if January 31, Expires: no longer subject 2005 to Section 16. Estimated average ANNUAL STATEMENT OF CHANGES IN BENEFICIAL Form 4 or Form burden hours per 5 obligations OWNERSHIP OF SECURITIES response... 1.0 may continue. See Instruction Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, 1(b). Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section Reported 30(h) of the Investment Company Act of 1940 Form 4 Transactions Reported 1. Name and Address of Reporting Person * 2. Issuer Name and Ticker or Trading 5. Relationship of Reporting Person(s) to Issuer Kipe David Symbol SYSTEMAX INC [SYX] (Check all applicable) (First) 3. Statement for Issuer's Fiscal Year Ended (Last) (Middle)

(Street)	4. If Amendment, Date Original	Individual or Joint/Group Reporting
	Filed(Month/Day/Year)	
		(check applicable line)

(Month/Day/Year)

12/31/2018

PORT
WASHINGTON, NYÂ 11050

X Form Filed by One Reporting Person
__ Form Filed by More than One Reporting

					, <u>-</u>	,	•
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any	3. Transaction Code	4. Securities Acquired (A) or Disposed of (D)	5. Amount of Securities Beneficially	6. Ownership Form: Direct (D) or	7. Nature of Indirect Beneficial
(msu. 3)		(Month/Day/Year)	(Instr. 8)	(Instr. 3, 4 and 5)	Owned at end of Issuer's	Indirect (I) (Instr. 4)	Ownership (Instr. 4)
				(A) or	Fiscal Year (Instr. 3 and 4)	(IIISU. +)	(IIIsu: +)
Common Stock	04/02/2018	Â	F	Amount (D) Price \$ 621 (1) D \$ 27.9	5,974 <u>(2)</u>	D	Â

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

(State)

(Zip)

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 control number.

Director

_ Officer (give title

X

below)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

_ 10% Owner _ Other (specify

g

below)

SVP & Chief Operations Officer

SEC 2270 (9-02)

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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	isable and	7. Title	e and	8. Price of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	Number	Expiration Da	ate	Amou	nt of	Derivative
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ties	(Instr. 5)
	Derivative				Securities			(Instr.	3 and 4)	
	Security				Acquired					
					(A) or					
					Disposed					
					of (D)					
					(Instr. 3,					
					4, and 5)					
									A mannt	
									Amount	
						Date	Expiration		or	
						Exercisable	Date		Number of	
					(A) (D)					
					(A) (D)				Shares	

of D

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Reporting Owners

Reporting Owner Name / Address	Relationships						
•	Director	10% Owner	Officer	Other			
Kipe David C/O SYSTEMAX INC. 11 HARBOR PARK DRIVE	Â	Â	SVP & Chief Operations Officer	Â			
PORT WASHINGTON, NY 11050							

Signatures

/s/ David Kipe by April Gruder,
Attorney-in-Fact
01/22/2019

**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 surrendered for payment of tax liability incident to vesting of prior restricted stock award.
- (2) The amount of non-derivative securities beneficially owned as of the date of the filing of this Form 5 is 5,974, which includes 5,117 unvested Restricted Stock Units that were granted on October 2, 2018 and 857 shares of common stock.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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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