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	3)													
1. Name and Address of Reporting Person * LEGROTTAGLIE VITO			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) 02/05/2021						X Officer (give title below) Other (specify below) VP & Chief Information Officer						
(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				
EATON (City	TOWN, N	J 07724 (State)	(Zip)												
` '		(State)	(Zip)		Tab	ole I - No	n-Der	ivative S	Securities	Acqui	ired, Dispo	osed of, or l	Beneficially		
1.Title of S (Instr. 3)	(Instr. 3) Date		2. TransactionDate(Month/Day/Year)		, if	Code (Instr. 8)		(A) or Disposed of (Instr. 3, 4 and 5)		of (D)	Beneficial Reported	ally Owned Following I Transaction(s)		Form:	7. Nature of Indirect Beneficial
				(Month/Day/Y	ear)	Code	V	Amoun	(A) or	Price	(Instr. 3 a	nd 4)		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common Stock			02/05/2021			F ⁽¹⁾		385	D	\$ 19	48,550		`	D	
	Report on a	separate line for	each class of secur	rities beneficially	owi	ned direc	Pers cont	ons wh	o respor	m are	not requ		spond unle	ss	1474 (9-02)
	Report on a	separate line for	Table II - l	Derivative Secu	ritie	es Acquir	Pers cont the f	ons wh tained ir form dis	o respon this for plays a	m are curre eficial	not requesting ntly valid	ired to res		ss	1474 (9-02)
Reminder:		3. Transaction Date	Table II - 1 (a) 3A. Deemed Execution Da (aar) (aar)		rities war 5. N of D S A (// D of (I	es Acquir rrants, o	Perscont the f	ons wh tained ir form dis	o responding this for splays a control of the securities of the se	eficial rities) 7. Ti Amo Und Secu	not requesting ntly valid	OMB con 8. Price of	spond unle	of 10. Owners Form of Derivati Security Direct (or Indir	11. Natur of Indire Benefici Owners! (Instr. 4)

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
LEGROTTAGLIE VITO 4 INDUSTRIAL WAY WEST SUITE 300 EATONTOWN, NJ 07724			VP & Chief Information Officer				

Signatures

/s/ Vito Legrottaglie	02/09/2021
**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.