## FORM 4

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

OMB APPROVAL
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 Type I	Responses	8)												
1. Name and Address of Reporting Person * NYNENS SIMON F			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) 1157 SHREWSBURY AVENUE			3. Date of Earliest Transaction (Month/Day/Year) 11/21/2006						X Officer (give title below) Other (specify below)  Chairman & Chief Exec Ofcr					
(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					
SHREWSBURY, NJ 07702 (City) (State) (Zip)									nired, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, i	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (Instr. 3, 4 and 5)		quired of (D)	5. Amoun Beneficial Reported	nt of Securities ally Owned Following Transaction(s)		6. Ownership Form:	Beneficial
				(Month/Day/Year	Code	V	Amount (A) or (D) Price		Price	(Instr. 3 and 4)		oı (I	or Indirect	Ownership (Instr. 4)
		11/21/2006		F		2,382 D	D	\$ 14	207,618		Γ	D		
	eport on a s	separate line for	each class of secur	l ities beneficially o		Perso	ns who	o respo			ction of inf	ormation		1474 (9-02)
	eport on a s	separate line for	Table II - I	Derivative Securit	ies Acquire	Perso contai the fo	ons who ined in orm disp	o responding this for plays a	rm are currer reficiall	not requ ntly valid	ired to res		s	1474 (9-02)
Reminder: Republic Reminder: Remin		3. Transaction	Table II - I (  3A. Deemed Execution Date any	,	ies Acquire arrants, op 5.	Perso contain the for ed, Disp tions, of 6. Dataind Ex	ons who ined in orm dis posed o converti te Exerc xpiration th/Day/Y	o responding this for plays a left, or Bendible secunisable in Date	rm are currer reficiall rities) 7. Ti Amo Unde Secu (Inst. 4)	not requ ntly valid	OMB conf	pond unles	f 10. Ownersl Form of Derivati Security Direct (l or Indire	11. Naturof Indire Benefici Ownersi (Instr. 4)

#### **Reporting Owners**

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
NYNENS SIMON F							
1157 SHREWSBURY AVENUE			Chairman & Chief Exec Ofcr				
SHREWSBURY, NJ 07702							

### **Signatures**

/s/Simon F. Nynens	11/22/2006
**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.