### FORM 4

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

OMB APPROVAL					
OMB Number:	3235-0287				
Estimated average burden					
nours per response					

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 Responses)													
1. Name and Address of Reporting Person* BRYANT ANDREW S		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) 4 INDUSTRIAL WAY WEST, SUITE 300		3. Date of Earliest Transaction (Month/Day/Year) 08/03/2021				-	Office	r (give title belo	ow)(	Other (specify be	elow)		
(Street) EATONTOWN, NJ 07724			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				le Line)	
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										
1.Title of Security (Instr. 3)  2. Transact Date (Month/Da	e onth/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr. 8)			of (D) Benefici		ally Owned Following d Transaction(s)		6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership		
			(Month/Day/Tear)	Code	V Aı	nount	(A) or (D) I	Price	(msu. 3 a	nu +)			(Instr. 4)
Common Stock	08/	03/2021		A	2,	322	A S	0 8	9,427			D	
Reminder: Report on a sep	parate line for each	h class of securi	ties beneficially ow		Person: contain	who ed in t	this forn	n are	not requ		spond unle	ss	1474 (9-02)
Reminder: Report on a sep	parate line for each	Table II - E	Derivative Securiti	es Acquire	Persons contain the forn	s who ed in t n displ	this forn lays a c or Bene	n are urren ficiall	not requ tly valid	ired to res		ss	1474 (9-02)
1. Title of 2. 3. Derivative Conversion D	. Transaction Date Month/Day/Year)	Table II - E	Derivative Securities, puts, calls, wa 4. e, if Transaction Code (Instr. 8)	es Acquire rrants, op	Persons contain the forn	s who ed in to display sed of, nvertib	this form lays a c or Bene ole securi able Date	ficially ficially fities) 7. Tit Amou Unde Secur	not requitly valid  y Owned  tle and unt of erlying	OMB conf	spond unle	f 10. Ownersh Form of Derivativ Security: Direct (I or Indire	11. Nation of Indir Benefic Owners (Instr. 4

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
BRYANT ANDREW S 4 INDUSTRIAL WAY WEST SUITE 300 EATONTOWN, NJ 07724	X				

# **Signatures**

/s/ Andrew S. Bryant	08/05/2021	
**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).

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.