FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

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

OMB APPROVAL
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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

(1 I IIII OI I Y	e Responses)													
1. Name and Address of Reporting Person PINT GERALD D				2. Issuer Name and Ticker or Trading Symbol COMMUNICATIONS SYSTEMS INC [JCS]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director10% Owner				
(Last) (First) (Middle) 10900 RED CIRCLE DRIVE				3. Date of Earliest Transaction (Month/Day/Year) 07/09/2010						Officer (give	title below)	Othe	r (specify below)	
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year) 05/24/2010						_X_	6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person uired, Disposed of, or Beneficially Owned				
MINNETONKA, MN 55343 (City) (State) (Zip)				Table I - Non-Derivative Securities Assu					Acquired						
1.Title of So (Instr. 3)	ecurity		2. Transaction Date (Month/Day/Year)	2A. Dee Execution any (Month/	on Date	, if 3. (I	Transa	(A) (In	Securities Acqu or Disposed of str. 3, 4 and 5)	ired 5. A f (D) Owr Trar	mount of S	ecurities Be	neficially i	5. Ownership of Form:	7. Nature of Indirect Beneficial Ownership Instr. 4)
	•	•						Persons	who respond	to the co	llection o	f informat	ion contain	ed SEC 1	474 (9-02)
			Table II -	Derivati	ve Seci	ırities	Acqui	in this fo a current	rm are not re tly valid OMB ed of, or Benef	control n	umber.	unless the	form displa	ıys	
				(e.g., put	s, calls	warr	ants, o	in this fo a current red, Dispos options, con	tly valid OMB ed of, or Benef vertible securit	control n	umber. ned		·		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date, if	4. Transact	s, calls 5. tion of De N See (A Di of (Ir	warra Numbe	er 6. Ex ve (M	in this fo a current red, Dispos	tly valid OMB ed of, or Benef vertible securit sable and te	control n	umber. ned d Amount	8. Price of	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction ((Instr. 4)	f 10. Ownershi Form of Derivativ Security: Direct (D or Indirec	(Instr. 4)
Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if	4. Transact	s, calls 5. tion of De Ac (A Di of (Ir an	Numberivative curities equired of or sposed (D) astr. 3, d 5)	ants, o er 6. l Ex //e (M s l l 4,	in this fo a current red, Dispos ptions, con Date Exerci spiration Dat fonth/Day/Y	tly valid OMB ed of, or Benef vertible securit sable and te	icially Own ties) 7. Title an of Underly Securities	umber. ned d Amount	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(f 10. Ownershi Form of Derivativ Security: Direct (D or Indirect s) (I)	of Indirect Beneficia Ownershi (Instr. 4)

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
PINT GERALD D 10900 RED CIRCLE DRIVE MINNETONKA, MN 55343	X					

Signatures

/s/ Gerald Pint	07/09/2010
**Signature of Reporting Person	Date

Explanation of Responses:

- \star 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).

Remarks:

No. 8, Price of Derivative Security was originally stated as \$11.77. Corrected price is \$11.82 based on price at date of grant.

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.