FORM 4

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

OMB APPROVAL
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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 Responses	s)																	
Name and Address of Reporting Person * Hlavka Kristin					2. Issuer Name and Ticker or Trading Symbol COMMUNICATIONS SYSTEMS INC [JCS]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle) 10900 RED CIRCLE DRIVE				3. Date of Earliest Transaction (Month/Day/Year) 03/28/2017									X Officer (give title below) Other (specify below) Controller						
(Street) MINNETONKA, MN 55343					4. If Amendment, Date Original Filed(Month/Day/Year)								-	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person					
(City) (State) (Zip)				Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned															
1.Title of Security (Instr. 3)			Date	2. Transaction Date (Month/Day/Year)		Execution Date, if any (Month/Day/Year)			ction	(A) or (Instr.	(Instr. 3, 4 and 5) (A) or		(D)	Beneficial	lly Owned Following Transaction(s)		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership	
Common	Stock		03/28/	/2017				Α		361	A	\$	0 6	6,317			D		
1. Title of Derivative Security 1. Title of Derivative Conversion Opate (Month/Day Price of Derivative Security) 3. Transacti Date (Month/Day Opation of Exercise (Month/Day Opation		n 3A Ex Year) an	A. Deemed xecution Dates	(e.g., puts, calls, warrants,				the form displays a currence of the form displays a currence o			ficiall ties) 7. Ti Amo Unde Secu (Inst	ally Owned		9. Number of	of 10. Owner Form of Deriva Securit Direct or Indii	Ownersh (y: (Instr. 4)			
						Code	V	(A) (D)	Date Exer		Expira Date	ation	Title	Amount or Number of Shares					
Repor	Reporting Owners																		
Rela				tions	hips														
Reporting Owner Name / Address		Director	10% Owner	C	Officer		Other												

Signatures

Hlavka Kristin

10900 RED CIRCLE DRIVE

MINNETONKA, MN 55343

/s/ Thomas G. Lovett, Attorney-in-Fact for Kristin Hlavka	03/30/2017		
***Signature of Reporting Person	Date		

Controller

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.