## 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 Response	s)													
1. Name and Address of Reporting Person * FLUEGGE SCOTT				2. Issuer Name and Ticker or Trading Symbol COMMUNICATIONS SYSTEMS INC [JCS]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) (First) (Middle) 12946 66TH ST N				3. Date of Earliest Transaction (Month/Day/Year) 03/28/2017							X Officer (give title below) Other (specify below)  VP				
(Street) WEST PALM BEACH, FL 33412				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)		Ta	able I - No	on-Der	ivative S	Securities	Acqui	red, Dispo	osed of, or l	Beneficially	Owned	
(Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr. 8)		(Instr. 3, 4 and 5) (A) or		of (D) Beneficia		nt of Securities ally Owned Following Transaction(s) and 4)		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common	Stock	(	03/28/2017			A		979	A	\$ 0	6,493			D	
Security	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Yo	3A. Deemed Execution Da	e.g., puts, c 4. Trans Code	es Acquired, Dis rrants, options, 5. 6. Da and E (Mon Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		Expiration Date ath/Day/Year)		7. Ti Amo	•	8. Price of Derivative Security (Instr. 5)	9. Number of	of 10. Owners Form of Derivati Security Direct ( or Indire	(Instr. 4)	
				Cod	e V	(A) (D			Expiration Date	<sup>1</sup> Title	Amount or Number of Shares				
Repor	ting O	wners													
Donouting Owney Name / Address			R	elationships											
			Director 10%	6	Officer	Other									

### **Signatures**

FLUEGGE SCOTT 12946 66TH ST N

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

Owner

VP

## **Explanation of Responses:**

WEST PALM BEACH, FL 33412

\* 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.