FORM 4

(Print or Type Responses)

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

OIVIB APPROV	AL
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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

Name and Address of Reporting Person * Lacey Roger HD				2. Issuer Name and Ticker or Trading Symbol COMMUNICATIONS SYSTEMS INC [JCS]						5	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) 03/17/2015						Off	ficer (give ti	tle below)	Othe	(specify below	v)	
(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 Person Form filed by More than One Reporting Person aired, Disposed of, or Beneficially Owned)	
(City) (State) (Zip)				Table I - Non-Derivative Securities Acqui						s Acquir						
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yea		2A. Deemed Execution Date, i any (Month/Day/Yea		Coc (Ins	Fransaction de str. 8)	(A) (Inst	ecurities Acquer Disposed or Disposed or a, 3, 4 and 5) (A) or (D)	f (D) C	Amount of Securities Beneficially byned Following Reported Transaction(s) Instr. 3 and 4)		·	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
Common	Common Stock									2	20,078	3.813			D	
Reminder:	Report on a s	•					in th	is for	n are not re	quired t	to res	pond un		on containe form display		1474 (9-02)
	·		· · · · · · · · · · · · · · · · · · ·	(e.g., p	puts, calls, wa	arran	in that a cu	is form rrently isposed , conve	n are not re valid OMB of, or Benefi rtible securit	quired to controlicially Oies)	to res _i I numi Iwned	pond un ber.	less the f	orm display	rs .	, ,
1. Title of	·	3. Transaction Date	3A. Deemed Execution Date, if	4. Transact	5. Numb of Deriving	er ative es d (A) esed	cquired, Donts, options 6. Date Ex Expiration (Month/Da	is formation is formation in the second is second in the s	m are not re y valid OMB l of, or Benefi rtible securit le and	quired to control cont	to responded to respond to respon	pond un ber. Amount	less the f	9. Number o	of 10. Owners Form of Derivat Security Direct (or Indir	11. Natu hip of Indire of Benefici: vive Ownersh (Instr. 4)
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date	3A. Deemed Execution Date, if any	4. Transact	5. Numb tion of Deriv Securitie Acquired or Dispo of (D) (Instr. 3,	er ative es d (A) esed	cquired, Donts, options 6. Date Ex Expiration (Month/Da	is form rrently isposed , conve ercisab Date ny/Yean	m are not re y valid OMB l of, or Benefi rtible securit le and	quired to control cont	owned e and Aderlying ities 3 and 4	pond un ber. Amount	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported	of 10. Owners Form of Derivat Security Direct (or Indir	11. Natu of Indire Benefici. Ownersh (Instr. 4)

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Lacey Roger HD 10900 RED CIRCLE DRIVE MINNETONKA, MN 55343	X					

Signatures

Suzette McNally, Attorney-in-Fact for Roger HD Lacey	03/19/2015
**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).
- (1) Option vests as to 25% on each of the first four anniversaries of the 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.
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