Marion Elaine D Form 5 April 22, 2013

FORM 5

OMB APPROVAL

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

OMB 3235-0362 Number:

no longer subject to Section 16. Form 4 or Form 5 obligations may continue.

Check this box if

January 31, Expires: 2005 Estimated average

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

burden hours per response... 1.0

See Instruction Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, 1(b). Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section Reported

Form 4

Transactions Reported

30(h) of the Investment Company Act of 1940

Reported							
1. Name and Add Marion Elaine	-	ting Person *	2. Issuer Name and Ticker or Trading Symbol EPLUS INC [PLUS]	5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First)	(Middle)	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 03/31/2013	(Check all applicable) Director 10% Owner X Officer (give title Other (specify			
13595 DULLES TECHNOLOGY DRIVE		OLOGY	05/61/2016	below) below) Chief Financial Officer			
	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)	6. Individual or Joint/Group Reporting (check applicable line)			
HERNDON,Â	. VAÂ 201'	71-3413		_X_ Form Filed by One Reporting Person Form Filed by More than One Reporting Person			

(State)

(Zip)

(City)

(City)	(State)	(Zip) Tabl	le I - Non-Der	ivative Se	curiti	es Acquir	ed, Disposed of	, or Beneficiall	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Date, if Transaction (A) or Disposed of (Dany Code (Instr. 3, 4 and 5) (Month/Day/Year) (Instr. 8) (A)		d of (D)	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	12/26/2012	Â	L	34 (1)	A	\$ 40.29	55,255	D	Â
Common Stock	12/26/2012	Â	L	7 (2)	A	\$ 40.29	107	I	By IRA

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 2270 (9-02)

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transaction Code (Instr. 8)	nsaction Number Expir de of (Mon		eisable and ate Year)	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	
				(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
. 9	Director	10% Owner	Officer	Other			
Marion Elaine D 13595 DULLES TECHNOLOGY DRIVE HERNDON, VA 20171-3413	Â	Â	Chief Financial Officer	Â			

Signatures

Elaine D.
Marion

**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).
- The shares were acquired through a dividend reinvestment which had previously been established in a brokerage account. The number of (1) shares purchased included a fractional share. The number reported above has been rounded upward to the next full share. The reporting person hereby undertakes to provide upon request by the SEC staff full information regarding the number of shares.
- The shares were acquired through a dividend reinvestment which had previously been established in an IRA. The number of shares (2) purchased included a fractional share. The number reported above has been rounded upward to the next full share. The reporting person hereby undertakes to provide upon request by the SEC staff full information regarding the number of shares.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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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