Edgar Filing: EPLUS INC - Form 4

EPLUS INC											
Form 4											
August 12, 2	013										
FORM	4		a an aun							PROVAL	
	UNITE	DSTATE		TTIES A hington,			NGE (COMMISSION	OMB Number:	3235-0287	
Check thi	ter.			-					Expires:	January 31, 2005	
subject to				GES IN BENEFICIAL OWNE				NERSHIP OF	Estimated a		
Section 16. SECURITIES							burden hou	•			
Form 4 or Form 5		ourcuont to	Section 1	S(n) of the	. Soourit	ios F	vohono	ge Act of 1934,	response 0.5		
obligation	ns Section 1						-	f 1935 or Sectio	n		
may cont See Instru	inue.) of the In	•	•	- ·			11		
1(b).	iction	()			· · ·						
(Print or Type F	Responses)										
1. Name and A	ddress of Reporti	ng Person *	2 Issuer	Name and	Ticker or	Tradir	NG NG	5. Relationship of	² Reporting Per	son(s) to	
				2. Issuer Name and Ticker or Trading ymbol				Issuer			
			EPLUS INC [PLUS]								
(Last)	(First)	(Middle)	3. Date of Earliest Transaction			(Check all applicable)					
× /	`	× /	(Month/D					Director	10%	Owner	
	LES TECHNO	DLOGY	08/12/20)13				X Officer (give below)	e title Othorem Otho	er (specify	
DRIVE								· · · · · · · · · · · · · · · · · · ·	or Vice Presider	ıt	
				4. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check				
				(Month/Day/Year)				Applicable Line)			
		410						_X_ Form filed by 0 Form filed by N	One Reporting Pe Aore than One Re		
HERNDON	, VA 20171-34	413						Person		F8	
(City)	(State)	(Zip)	Table	e I - Non-D	erivative	Securi	ities Aco	quired, Disposed of	f, or Beneficial	ly Owned	
1.Title of	2. Transaction I	Date 2A. De	emed	3.	4. Securi	ties A	cquired	5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Ye	ear) Executi	on Date, if	Transaction(A) or Disposed of Code (D) (Instr. 8) (Instr. 3, 4 and 5)				Securities Beneficially	Form: Direct Indirect (D) or Benefic	Indirect	
(Instr. 3)		any (Month	/Day/Year)							Beneficial Ownership	
		(WOIIIII	/Day/Teal)	(11150.0)	(11150.3,	4 anu	3)	Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported			
						or		Transaction(s) (Instr. 3 and 4)			
Comment				Code V	Amount	(D)	Price	(india o undia)			
Common	08/12/2013			F	276 (1)	D	\$ 50.5	10,389	D		

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

Stock

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.

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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. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
MENCARINI STEVEN J 13595 DULLES TECHNOLOGY DRIVE HERNDON, VA 20171-3413			Senior Vice President				

Signatures

/s/ Steven J. 08/12/2013 Mencarini

<u>**</u>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) Represents shares withheld for payment of tax liability arising as a result of the partial vesting of a restricted stock award granted on August 10, 2010, and originally reported by the reporting person in a Form 4 filed with the Commission on August 11, 2010.

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.