Edgar Filing: SURGE COMPONENTS INC - Form 4

| SURGE CO Form 4 February 21, | MPONENTS I 2017 | NC | | | | | | | | | | | | |
|---|-----------------------------------|---|-------------------------------|---------------------------------|---------------------------------|--|---|---|--|---|--------------------------|--|--|--|
| FORM | | | | | | | | | | OMB AF | PROVAL | | | |
| | Washington, D.C. 20549 | | | | | | | | | | 3235-0287 | | | |
| Check thi if no long subject to Section 1 Form 4 or | ar. | | | | | | | | | Expires: Januar | | | | |
| | 6. SIAI | EMENT O | F CHAN | NERSHIP OF | 2005 werage rs per 0.5 | | | | | | | | | |
| Form 5 obligation may cont <i>See</i> Instru 1(b). | ns Section 1 | Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section | | | | | | | | | | | | |
| (Print or Type F | Responses) | | | | | | | | | | | | | |
| Tofias Michael D Symbol SURGE | | | er Name and Ticker or Trading | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | |
| | | | [SPRS] | | | | | | Director | V 100 | | | | |
| (Last) (First) (Middle) 3. Date of (Month/D 25 CAMBRIDGE DRIVE 01/13/20 | | | | - | | | | | Director 10% Owner Officer (give title Other (specify below) below) | | | | | |
| SHORT HII | (Street) | 3 | 4. If Ame Filed(Mon | | | e Original | | | 6. Individual or Jo Applicable Line) _X_ Form filed by C Form filed by M Person | one Reporting Pe | rson | | | |
| (City) | (State) | (Zip) | Tabl | e I - No | n-D | erivative Se | curitie | es Acai | uired, Disposed of | . or Beneficial | lv Owned | | | |
| 1.Title of Security (Instr. 3) | 2. Transaction E (Month/Day/Ye | ar) Executio any | | 3. Transa Code (Instr. | action 8) | 4. Securitie n(A) or Disp (Instr. 3, 4 | es Acqu oosed o and 5) (A) or | uired | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect | | | |
| Common Stock, par | 01/10/0015 | | | Code | | Amount | (D) | Price | | 2 | | | | |
| value \$0.001 per share | 01/13/2017 | | | G <u>(1)</u> | V | 8,882 | D | \$0 | 1,559,241 | D | | | | |
| Common Stock, par value \$0.001 per share | 02/15/2017 | | | G <u>(1)</u> | V | 292,000 | D | \$ 0 | 1,267,241 | D | | | | |

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

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 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 4. Transac Code (Instr. 8 | ction (8)] ((| 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | 7. Titl Amou Under Secur (Instr. | int of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr |
|---|---|---|------------------------------------|--------------------------|---|---------------------|--------------------|--|--|---|--|
| | | | Code | v | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Add | ress | Relationships | | | | | | | |
|---|------------|---------------|---------|-------|--|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | | |
| Tofias Michael D 25 CAMBRIDGE DRIVE SHORT HILLS, NJ 07078 | | Х | | | | | | | |
| Signatures | | | | | | | | | |
| /s/ Michael D. Tofias | 02/21/2017 | | | | | | | | |
| <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) This represents a charitable donation.

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.