Edgar Filing: MAVROMMATIS NED - Form 4

MAVROMM	IATIS NED											
Form 4												
June 13, 2018	3											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL			
	UNITEDS	STATES S		ITIES A hington,			NGE (COMMISSION	OMB Number:	3235-0287		
Check this				U ,					Expires:	January 31,		
if no long subject to		ENT OF	CHAN	GES IN I	BENEFI	CIA	LOW	NERSHIP OF	\mathbf{F} 20			
Section 10						TIES				Estimated average burden hours per		
Form 4 or									response 0.			
Form 5	Filed purs	uant to Se	ection 16	6(a) of the	e Securiti	ies Ez	xchang	e Act of 1934,				
obligation may conti) of the P	ublic Ut	ility Hold	ing Com	ipany	Acto	f 1935 or Sectio	n			
See Instru		30(h) o	of the Inv	vestment	Compan	y Act	of 194	40				
1(b).												
(Print or Type R	esponses)											
		*						6 D 1 .: 1				
MAVROMMATIS NED Symbol				r Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer				
								135001				
]	ID SYS	TEMS IN	C [IDSY]		(Chec	ck all applicable	e)		
(Last)	(First) (M	liddle)	3. Date of	Earliest Tra	ansaction							
				Ionth/Day/Year)				Director 10% Owner				
	STEMS, INC., 12	23 (06/11/20)18				X Officer (give below)	below)	er (specify		
TICE BOUL	EVARD							· · · · · · · · · · · · · · · · · · ·	Financial Offic	er		
(Street) 4. If A			4. If Amei	f Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
				(Month/Day/Year)				Applicable Line)				
				•				_X_ Form filed by 0				
WOODCLIF	FF LAKE, NJ 076	577						Form filed by N Person	More than One Re	eporting		
(City)	(State) (Zip)										
(City)	(State) (Zip)	Table	e I - Non-D	erivative S	Securi	ties Acc	uired, Disposed of	f, or Beneficial	ly Owned		
1.Title of	2. Transaction Date	Execution Date, if		3. 4. Securities Acquired					6. Ownership			
Security	(Month/Day/Year)			Transaction(A) or Disposed of			Securities	Form: Direct				
(Instr. 3)		any (Month/D)	(Month/Day/Year)		Code (D) (Instr. 8) (Instr. 3, 4 and 5)			Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership		
		(month/D)	uy/ I cui)	(11301.0)	$(1150.5, \pm and 5)$			Following	(Instr. 4)			
						(A)		Reported				
						(A) or		Transaction(s)				
				Code V	Amount	(D)	Price	(Instr. 3 and 4)				
Common												
Stock, par	06/11/2018			F	3,456	D	\$	208,989	D			
value \$0.01	00/11/2010			I,	(1)	D	6.41	200,909	D			

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

per share

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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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Under Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur 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 / Address	Relationships						
	Director	10% Owner	Officer	Other			
MAVROMMATIS NED C/O I.D. SYSTEMS, INC. 123 TICE BOULEVARD WOODCLIFF LAKE, NJ 07677			Chief Financial Officer				
Signatures							

By: /s/ Ned Mavrommatis 06/13/2018 <u>**Signature of Reporting</u> Date Person

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).
- These shares of common stock, par value \$0.01 per share, of I.D. Systems, Inc. (the "Company") were withheld by the Company to
 (1) satisfy tax withholding obligations upon the vesting of a restricted stock award previously made to Ned Mavrommatis, as permitted under the Company's 2007 Equity Compensation Plan, as amended.

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.