## Edgar Filing: SYSTEMAX INC - Form 5

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SYSTEMA Form 5												
February 14									OMB AF	PROVAL		
FORM	-								OMB			
		STATES		SECURITIES AND EXCHANGE COM				IMISSION	Number:	3235-0362		
Check th no longe	r subject	Washington, D.C. 20549					Expires:	January 31, 2005				
to Sectio Form 4 c 5 obligat may con See Instr	or Form <b>ANN</b> ions tinue.	ATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES					CIAL	Estimated average burden hours per response 1.				
1(b).	Filed pu				Securities E							
Form 3 H Reported Form 4 Transact Reported	ions				ng Company Company Act			35 or Section				
1. Name and Address of Reporting Person <u>*</u> Robert Leeds 2006 GRAT			2. Issuer Name <b>and</b> Ticker or Trading Symbol SYSTEMAX INC [SYX]					5. Relationship of Reporting Person(s) to Issuer				
							(Check all applicable)					
(Last) (First) (Middle) C/O SYSTEMAX, INC., 11 HARBOR PARK DRIVE			<ul><li>3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year)</li><li>02/15/2008</li></ul>				Director					
(Street)			4. If Amendment, Date Original				6. Individual or Joint/Group Reporting					
			Filed(Month/Day/Year)				0. 1		nu oroup rep	Reporting		
							(check applicable line)					
PORT WASHING	GTON,, NY 1	1050						Form Filed by O Form Filed by M				
(City)	(State)	(Zip)	Tab	ole I - Non-De	rivative Securi	ties Ac	quire	d, Disposed of,	or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	e 2A. Deen Executior any (Month/D	n Date, if	3. Transaction Code (Instr. 8)	4. Securities A or Disposed of (Instr. 3, 4 an Amount	of (D)		5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	Ownership Form:	7. Nature of Indirect Beneficial Ownership (Instr. 4)		

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.

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### Edgar Filing: SYSTEMAX INC - Form 5

 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. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. O Se B O E I S Fi (I
					(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

# **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Robert Leeds 2006 GRAT C/O SYSTEMAX, INC. 11 HARBOR PARK DRIVE PORT WASHINGTON,, NY 11050	Â	X	Â	Â		
Signatures						
Robert Leeds, Trustee, by Curt Rush, Attorney-in-fact		02/14/2008				
<b>**</b> 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) shares were distributed to settlor of GRAT pursuant to right of settler to substitute other collateral of equal value

(2) shares were distributed to settlor of GRAT pursuant to obligation to make annual annuity distribution

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#### **Remarks:**

Note: subsequent to these distributions, the GRAT is no longer a 10% stockholder; the settler of t

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.