FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

TATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

l	OMB APPRO	VAL
l	OMB Number:	3235-0287
l	Estimated average burde	en
l	hours per response:	0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>Karbowski James Joseph</u>					2. Issuer Name and Ticker or Trading Symbol ASURE SOFTWARE INC [ASUR]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle) 2413 PINE HILL CT.				3. Date of Earliest Transaction (Month/Day/Year) 05/16/2018									X	below)		le Other (spe below) perating Officer		specify		
(Street) TRAVERSE CITY MI 49686			4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting								
(City)	(S	tate)	(Zip)												Person					
		Tak	le I - Non	-Deriv	ative	e Se	curities	s Ac	quired,	Disp	osed o	f, or B	enef	icially	Owned					
D.			2. Transaction Date (Month/Day/Year)			2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			Securitie Beneficia Owned F	5. Amount of Securities Beneficially Owned Following		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount (A) or (D)		or	Price	Reported Transact (Instr. 3 a	ion(s)			(Instr. 4)		
Asure So par value		Common Stock	(\$0.01												20,	901	D			
		-	Table II - D						uired, D , optior					-	Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day)	ate, T	Transaction Code (Instr.		n of E		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Am of Securities Underlying Derivative Secu (Instr. 3 and 4)		urity	8. Price of Derivative Security (Instr. 5)		Ownershi Form: Direct (D) or Indirect (I) (Instr. 4	Ownership	Beneficial Ownership (Instr. 4)	
				c	ode	v	(A)	(D)	Date Exercisab		xpiration ate	Title	or Nu of	nount mber ares						
Employee Stock Option (Right to Buy)	\$6.04								(1)	0	7/03/2019	Commo Stock (\$0.01 par value)		,000		50,000)	D		
Employee Stock Option (Right to Buy)	\$5.31								(2)	0	4/12/2021	Commo Stock (\$0.01 par value)		,000		20,000)	D		
Employee Stock Option (Right to Buy)	\$9.86								(1)	0	4/06/2022	Commo Stock (\$0.01 par value)		5,000		15,000)	D		
Employee Stock Option (Right to	\$14.2	05/16/2018 ⁽³⁾			A		50,000		(3)	1	2/15/2022	Commo Stock (\$0.01 par		,000	\$0	50,000)	D		

Explanation of Responses:

- 1. Such options shall vest over a 4 year period such that 25% of the shares shall vest on each anniversary date following issuance.
- 2. Such options shall vest over a 3 year period following issuance such that 1/3 of the shares shall vest on 4/12/2017 and an additional 8.33% shall vest each three (3) months thereafter.
- 3. The option grant was subject to shareholder approval of a new equity plan which was attained on May 16, 2018. The option vests in four equal annual installments beginning December 15, 2018.

/s/ Joe Karbowski

06/04/2018

** Signature of Reporting Person

Date

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

- * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.