FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.	C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-0287								
Estimated average burden								
hours per response:	0.5							

	tion 1(b).	iuc. See		Filed							ies Exchang mpany Act o		f 1934			llours	peri	esponse:	0.5	
Name and Address of Reporting Person*     Goepel Patrick				2. Issuer Name <b>and</b> Ticker or Trading Symbol ASURE SOFTWARE INC [ ASUR ]										tionship all app Direc	licable)	Reporting Person(s) to Issu ble) 10% Owr				
(Last) (First) (Middle) C/O ASURE SOFTWARE, INC. 3700 N CAPITAL OF TEXAS HWY, SUITE 350				3. Date of Earliest Transaction (Month/Day/Year) 12/18/2020									X Officer (give title Other (specify below)  Chairman & CEO					specify		
(Street) AUSTIN (City)			8746 Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Indiv Line) X	Form	al or Joint/Group Filing (Check Applicable orm filed by One Reporting Person orm filed by More than One Reporting erson				
		Table	I - Non	-Deriva	tive S	Secu	rities	Acq	uired,	, Dis	posed of	, or E	enefic	cially	Own	ed				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da				Executy/Year) if any		Deemed cution Date, y nth/Day/Year)		Transaction Disposed Code (Instr. 5)		ies Acquired ( <i>F</i> Of (D) (Instr. 3		3, 4 and Sec Ber Ow		Amount of ecurities eneficially wned Following		m: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) (D)	or Prio	rice Rep		rted saction(s) . 3 and 4)			(Instr. 4)	
Asure Software, Inc. Common Stock (\$0.01 par value)				12/18/2	2020				A		30,000	A	\$7	7.25	807,888			D		
	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. Deen Executio if any (Month/D	n Date,	4. Transact Code (in 8)		of Deriv Secu Acqu (A) o Dispo	r osed ) r. 3, 4 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration Exercisable Date			7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		unt ber		9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

**Explanation of Responses:** 

/s/ Patrick Goepel

12/18/2020

\*\* 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.