FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| | OMB APPRO | VAL | | | | |
|---|------------------------|-----------|--|--|--|--|
| | OMB Number: | 3235-0287 | | | | |
| l | Estimated average burd | 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* GALLUP PATRICIA | | | | | | | | 2. Issuer Name and Ticker or Trading Symbol PC CONNECTION INC [PCCC] | | | | | | | | | Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner | | | | | | |
|--|--|--|-------|--------------------------------------|--------|--|---|---|--------------------------------|------------|------------|--|------------------------------------|-----|-----|----------------------|---|--|-------|---|--------------|--|--|
| | CONNECTION, INC. | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 12/17/2013 | | | | | | | | | X | belov | , | ief A | Other (specify below) ef Admin Officer | | | |
| 730 MILFORD ROAD (Street) MERRIMACK NH 03054 (City) (State) (Zip) | | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | . Indiv ine) X | ′ | | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D. | | | | | action | ction 2A. Deemed Execution Date, | | | 3. 4. Sec Transaction Dispo | | 4. Securit | urities Acquired (A) or sed Of (D) (Instr. 3, 4 a | | | . | 5. Amount of | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | | |
| | | | | | | Code | v | Amount | | (A) or (D) | | e | Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) | | | | | | |
| Common Stock 12/17/ | | | | | | | | 2013 | | | V | 26,690 D | | \$0 | (1) | 488,810 | | D | | | | | |
| Common Stock | | | | | | | | | | | | | | | | 7,869,094 | | | I | By Trust | | | |
| Common Stock | | | | | | | | | | | | | | | | | 15 | 5,000(2) | | I | By Spouse | | |
| 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. 3. Transaction Date (Month/Day/Year) Security 3. A. Deemed Execution Date if any (Month/Day/Year) | | Date, | 4. Transaction Code (Instr. 8) | | of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date E: Expiration (Month/D | n Date ay/Yea | Amount of | | ount | nt er | | | | LO. Ownership Form: Direct (D) Or Indirect I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | | |

Explanation of Responses:

- $1. \ Gift to \ charitable \ organizations \ of \ shares \ owned \ by \ reporting \ person.$
- 2. The reporting person disclaims beneficial ownership of these securities, except to the extent of such reporting person's pecuniary interest therein. This report shall not be deemed an admission that the reporting person is the beneficial owner of such securities for purposes of Section 16 or for any other purpose.

/s/ Janice Rush, Attorney-in-Fact for Patricia Gallup 12/18/2013

** 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.