FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington.	D.C. 20549	

ton, D.C. 20549 OMB APPROVAL

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Estimated average b	ourden						
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).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equits securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-10). See Instruction 10

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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(0). 0	e instruction																				
Name and Address of Reporting Person*     BEFFA NEGRINI DAVID				2. Issuer Name <b>and</b> Ticker or Trading Symbol PC CONNECTION INC [ CNXN ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)									
BEFFA NEOKINI DAVID								_	-			v	Direc	tor		10% O	wner				
(Last) (First) (Middle) 730 MILFORD ROAD					3. Date of Earliest Transaction (Month/Day/Year) 12/13/2024									Office below	er (give title v)		Other ( below)	specify			
					4 If /	\ mono	lmont	Data o	f Origina	J Eilo	1 /Month/Do	v/Voor	۸.	G In	6 Individual or Joint/Group Filing (Chock Applicable						
					4. If Amendment, Date of Original Filed (Month/Day/Year)  6. Individual or Joint/Group Filing (Check Applicable Line)																
(Street)					1									V		filed by On	e Ren	orting Pers	on		
MERRIN	MACK N	H 0	3054		1										_	Form filed by More than One Reporting					
-					1										Person						
(City)	(St	ate) (Ž	Zip)																		
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
		Table	1 - 140	II-Deliva	ilive s	Jecu	HUES	АСЧ	uireu,	DIS					y Own	eu					
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day			Execution Date,		3. Transaction Code (Instr. 3, 8)  4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			A) or , 4 and		ties For cially (D) Following (I)		n: Direct or Indirect	7. Nature of Indirect Beneficial Ownership								
						Code	v	Amount	nt (A) or P		rice		rted saction(s) . 3 and 4)			(Instr. 4)					
Common Stock 12/13/2				2024		<b>G</b> <sup>(1)</sup>		10,000	I	)	\$0.00	6.	63,000		D						
		Tal	ble II -	Derivati	ve Se	curi	ties /	Acaui	ired. C	oasi(	osed of,	or Be	nefi	cially	Owne						
											onvertib										
1. Title of Derivative Security (Instr. 3)	Title of 2. 3. Transaction Date Execution Date, or Exercise (Month/Day/Year)			5. Number of Oberivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		str.	Price of erivative ecurity nstr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)						
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amo or Num of Shar	ber							

## **Explanation of Responses:**

1. This transaction involved a gift of securities by the reporting person to a charity. The reporting person disclaims beneficial ownership of the shares held by the charity.

## Remarks:

/s/Timothy J. McGrath, attorney-in-fact for David

12/31/2024

Beffa-Negrini

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.