FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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| OMB APPROVAL | | | | | | | | |
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| OMB Number: | 3235-0287 | | | | | | | |
| Estimated average | burden | | | | | | | |

0.5

hours per response:

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). 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. Name and Address of Reporting Person* Ferguson Jack L | | | | | 2. Issuer Name and Ticker or Trading Symbol PC CONNECTION INC [CNXN] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner | | | | | |
|--|---|------------|---|-------|--|--|--------------|---|---------------------------------------|---|--------------------|--|---|--|-----------------------------------|---|--|--|
| (Last) (First) (Middle) 730 MILFORD ROAD | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 09/01/2024 | | | | | | | | | er (give title | | Other (s below) | specify | |
| (Street) MERRIMACK NH 03054 (City) (State) (Zip) | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable ine) Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Trans Date (Month/ | | | | | 2A. Deemed Execution Date if any (Month/Day/Yea | | | e, Transaction Dispose Code (Instr. 5) | | rities Acquired (A) or ed Of (D) (Instr. 3, 4 an | | d Securit Benefic Owned | 5. Amount of Securities Beneficially Owned Following Reported | | : Direct r Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | Code | v | Amount | t (A) or P | | Transa | ction(s) 3 and 4) | | | (111501. 4) |
| Common | Stock | | | 09/0 | 1/2024 | 2024 | | | M | | 500 |) A \$ | | 00 65 | 65,180 | | D | |
| | | Т | | | | | | | | | | , or Ber ible sec | | y Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | | 3A. Deeme Execution if any (Month/Da | Date, | 4. Transaction Code (Instr. 8) | | 5. Number of | | 6. Date Ex Expiration (Month/Da | Date | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | | e s lly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisab | | Expiration Date | Title | Amount or Number of Shares | | | | | |
| Restricted Stock Units | (1) | 09/01/2024 | | | M | | | 500 | (2) | | (2) | Common Stock | 500 | \$0.00 | 1,500 |) | D | |

Explanation of Responses:

- 1. The restricted stock units convert into common stock on a one-for-one basis.
- 2. The restricted stock units were granted on February 13, 2018, with vesting scheduled in ten annual installments of 500 units each commencing September 1, 2018.

Remarks:

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

09/03/2024

Ferguson

** 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.