TSS, Inc. Form 3 January 14, 2014 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB APPROVAL OMB Number: 3235-0104

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

| 1. Name and Address of Reporting Person <u>*</u> Olsen Martin T. | | | 2. Date of Event Requiring Statement (Month/Day/Year) | 3. Issuer Name and Ticker or Trading Symbol TSS, Inc. [TSSI] | | | | |
|---|---------|-----------------|---|---|--|--|---|--|
| (Last) | (First) | (Middle) | 01/14/2014 | 4. Relationship of Reporting Person(s) to Issuer | | 5. If Amendment, Date Original Filed(Month/Day/Year) | | |
| C/O TSS, INC., 7226 LEE DEFOREST DRIVE, SUITE 104 | | | (Chee | | (Check all applicable) | | | |
| (Street) | | | | Director 10% Owner Officer Other (give title below) (specify below) Exec. VP, Sales & Marketing | | ow) | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person | |
| COLUMBIA, MD 21046 | | | | | | ting | | |
| (City) | (State) | (Zip) | Table I - N | Non-Derivat | ive Securiti | es Be | neficially Owned | |
| 1.Title of Secu (Instr. 4) | rity | | 2. Amount of Beneficially (Instr. 4) | | 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | 4. Nat Owne (Instr. | * | |
| Reminder: Repo | | ate line for ea | ch class of securities benefici | ^{ially} S | EC 1473 (7-02 |) | | |
| 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 control number. | | | | | | | | |
| Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | |

| 1. Title of Derivative Security (Instr. 4) | 2. Date Exercisable and Expiration Date (Month/Day/Year) | | 3. Title and Amount of Securities Underlying Derivative Security | | 4. Conversion or Exercise | 5. Ownership Form of | 6. Nature of Indirect Beneficial Ownership (Instr. 5) |
|---|--|--------------------|--|----------------------------------|------------------------------------|---|---|
| | Date Exercisable | Expiration Date | (Instr. 4) Title | Amount or Number of Shares | Price of Derivative Security | Derivative Security: Direct (D) or Indirect (I) | |

January 31,

2005

0.5

Expires:

response...

Estimated average burden hours per

(Instr. 5)

Reporting Owners

| Reporting | Owner Name / Address | Relationships | | | | | |
|--|----------------------|---------------|-----------|-----------------------------------|-------|--|--|
| | | Director | 10% Owner | Officer | Other | | |
| Olsen Martin T. C/O TSS, INC. 7226 LEE DEFOREST DRIVE, SUITE 104 COLUMBIA, MD 21046 | | Â | Â | Exec. VP, Sales & Marketing | Â | | |
| Signatures | | | | | | | |
| /s/ Martin T. Olsen | 01/14/2014 | | | | | | |
| <u>**</u> Signature of Reporting Person | Date | | | | | | |

Explanation of Responses:

No securities are beneficially owned

- * If the form is filed by more than one reporting person, *see* Instruction 5(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).

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Remarks:

No securities are beneficially owned by the reporting person as of the date the reporting person be

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.