SEC	Form	4
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## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL
OMB Number: 3235-0287
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)	Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).
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## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					or Se	ection 30(h)	) of the Inv	estmer	nt Com	pany Act of 19	940							
1. Name and Address of Reporting Person* MOSCHNER ALBIN F					2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>USA TECHNOLOGIES INC</u> [ USAT ]								ationship of F all applicab Director		Person	. ,		
(Last) 1022 AY					3. Date of Earliest Transaction (Month/Day/Year) 07/01/2016								Officer (g below)	ive title	10% Owner Other (specify below)			
(Street) LAKE FO	treet) AKE FOREST IL 60045				4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Indiv X	5. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(	State)	(Zip)															
		-	Fable I - Nor	n-Deriva	ative S	Securitie	es Acqu	iired,	Disp	osed of, o	r Benef	icially C	wned					
Dat		2. Transa Date (Month/D	Execution Date, h/Day/Year) if any		on Date, Trans Code		action (Instr. 4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a			and 5) Securities Beneficial Following		6. Own Form: (D) or I (I) (Insi	Direct I Indirect I tr. 4)	. Nature of ndirect eneficial ownership				
						Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		(In		Instr. 4)			
Common	Stock		07/01/2016 A 9,479 <sup>(1)</sup> A <b>\$</b> 0 417,762 D						D									
										sed of, or onvertible			vned					
1. Title of Derivative Security (Instr. 3)	2. Conversior or Exercise Price of Derivative	ise (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Yea	4. Transaction Code (Instr.		5. Number of		6. Date Exercisable and Expiration Date (Month/Day/Year) Derivati			d Amount ies g security	8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securitie Benefici Owned	ve es ally	Ownership Form: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
	Security			Code	v	(A)	(D)	Date	cisable	Expiration Date	Title	Amount or Number of Shares	Follov Repo Trans (Instr.		d tion(s)	(I) (Instr. 4)	str. 4)	
Series A Convertible Preferred Stock	(2)								(2)	(2)	Common Stock	1,358		7,000 D				
Non- Qualified Stock Option (Right to Buy)	\$2.05	03/07/2016		G			20,000 <sup>(3)</sup>		(4)	06/18/2021	Common Stock	20,000	\$0	0		D		
Non- Qualified Stock Option (Right to Buy)	\$2.05	03/07/2016		G		20,000 <sup>(3)</sup>			(4)	06/18/2021	Common Stock	20,000	\$0	20,0	00	I	By Moschner Family LLC	

**Explanation of Responses:** 

1. The shares vest as follows: 3,160 on 7/1/17; 3,160 on 7/1/18; and 3,159 on 7/1/19.

2. As of April 25, 2016, each share of series A convertible preferred stock was convertible into 0.1940 of a share of common stock at the option of the holder and is subject to further adjustment as provided in the Articles of Incorporation. The shares do not have an expiration date.

3. Represents non-qualified stock options assigned by Mr. Moschner to the Moschner Family LLC, an Illinois limited liability company, of which Mr. Moschner is the manager.

4. The options vested or vest as follows: 6,667 on 6/18/15; 6,667 on 6/18/16; and 6,666 on 6/18/17.

## /s/ Albin F. Moschner

\*\* Signature of Reporting Person

07/05/2016

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.