FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL	OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* HUNT T KENDALL					VA	2. Issuer Name and Ticker or Trading Symbol VASCO DATA SECURITY								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
						INTERNATIONAL INC [VDSI]									X Director Officer (give tit)				Owner r (specify	
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year)										w)		belov		
1901 SOUTH MEYERS ROAD, SUITE 210						08/16/2017														
(Street)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
OAKBRO	- 11		60181										X Form filed by One Reporting Person							
					-										Forn Pers		Nore th	an One Re	porting	
(City)	(St	tate)	(Zip)																	
		Tab	le I - N	on-Deriv	ative/	Sec	uritie	s Ac	quired	l, Di	sposed o	f, or E	Benefi	ciall	y Owne	ed				
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)						Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
							Code	v	Amount	(A) o (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)			
Common	non Stock, \$0.001 par value													100,000		I		By the Charitable Remainder Trust ⁽¹⁾		
Common Stock, \$0.001 par value													1,011,300			I	By the Barbara J. Hunt Marital Trust			
Common	Stock, \$0.0	001 par value												200,000 I					By Spouse ⁽²⁾	
Common	Stock, \$0.0	001 par value		08/16/	2017				S		4,100(3)	D	\$1	2.37 7,490,919 D						
Common	nmon Stock, \$0.001 par value		08/17/2017				S		4,100(3)	D	\$1	2.3	7,486,819			D				
		Т	able II -								osed of,				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	ar) if any		4. Transa Code (1. Fransaction Code (Instr.					isable and	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. De Se (Ir	Price of erivative ecurity estr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Ownersh Form: Direct (D or Indire (I) (Instr.		Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amour or Numbe of Shares	er						

Explanation of Responses:

- 1. The reporting person disclaims beneficial ownership to the extent he does not have a pecuniary interest in the securities and this report shall not be deemed an admission that the reporting person is the beneficial owner of the securities for the purpose of Section 16 or any other purpose.
- 2. Shares held by reporting person's spouse. Reporting person disclaims beneficial ownership of the shares held by his spouse and this report should not be deemed as admission that the reporting person is the beneficial owner of his spouse's shares for purposes of Section 16 or for any other purpose.
- 3. The sale reported in this Form 4 was effected pursuant to a Rule 10b5-1 trading plan established by the reporting person effective May 15, 2017.

Remarks:

/s/ Mark S. Hoyt, Attorney-in-**Fact**

08/18/2017

** 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.