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GSE SYSTE Form 4 November 2 FORM Check th if no lon subject to Section 1	4, 2015 A UNITED STAT uis box ger o STATEMENT 16.	Washin OF CHANGES	gton,]	D.C. 20 BENEFI	549			OMB AF OMB Number: Expires: Estimated a burden hou	rs per	
Form 4 or Form 5 obligations may continue.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 19400.5Item 100 (b).30(h) of the Investment Company Act of 194030(h)										
(Print or Type	Responses)									
1. Name and A Sorrells Chi	Address of Reporting Person ristopher D.	2. Issuer Nan Symbol GSE SYSTI				ng	5. Relationship of Issuer	Reporting Pers	son(s) to	
(Last)	(First) (Middle)	3. Date of Earl		-	rj		(Chec	k all applicable)	
C/O GSE SYSTEMS, INC., 1332 (Month/Day/ LONDONTOWN BLVD				Day/Year)X_ Director2015X_ Officer (g below)				ve title Other (specify below) f Operating Officer		
Filed(Month/Day/Year)					 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 					
		Filed(Month/Da	ay/Year)				_X_ Form filed by 0			
	LLE, MD 21784						_X_ Form filed by 0 Form filed by M Person	Iore than One Re	porting	
(City)	(State) (Zip)	Table I - J	Non-De			-	_X_ Form filed by C Form filed by M Person uired, Disposed of	fore than One Re	porting ly Owned	
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Common Stock	11/23/2015	А	1,400	А	\$ 1.63 53,469	D
Common Stock	11/24/2015	А	1,500	А	\$ 1.697 54,969	D
Common Stock	11/24/2015	А	6,300	А	\$ 1.699 61,269	D
Common Stock	11/24/2015	А	2,800	А	\$ 1.68 64,069	D

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

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 Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	of		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Sorrells Christopher D. C/O GSE SYSTEMS, INC. 1332 LONDONTOWN BLVD SYKESVILLE, MD 21784	X		Chief Operating Officer					
Signatures								
/s/ Christopher Sorrells 11/2	24/2015							
<u>**</u> Signature of	Date							

Reporting Person

Explanation of Responses:

- * 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. 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.