UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPR	OVAL				
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hours per response	э	0.5			

longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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										
Person * 2. Issuer Name and Ticker or Trading Symbol Optex Systems Holdings Inc [OPXS]			5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 06/09/2017				X Officer (give title below) Other (specify below) CEO and Chairman						
	4. If Amendment, Date Original 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 Person							
(Zip)	,	Cabla I No	- Da				and Diam		Danafiatalla.	O a-d	
2 Transaction				1							7. Nature
Date (Month/Day/Year)	Execution Date, any	if Code (Instr. 8)		(A) or Di	sposed o	of (D)	D) Beneficially Owned Following Reported Transaction(s) Form		Ownership Form:	of Indirect Beneficial	
	(Month/Day/Yea	Code	V	Amount	(A) or (D)	Price	(Instr. 3	or In (I)		or Indirect (I)	Ownership (Instr. 4)
06/09/2017		P		640,000	A S	\$ 0.3925	682,649	9		D	
for each class of sec	curities beneficial	y owned di	rectly	or							
			cor	ntained ir	this fo	orm are	not req	uired to re	espond unl	ess	EC 1474 (9- 02)
		•		•			ly Owned	l			
Execution D any	Pate, if Transaction Code	on of Derivati Securitic Acquire (A) or Dispose of (D) (Instr. 3	an (Mass)	d Expiratio	on Date	Amor Unde Secur	ount of erlying rities		Derivative Securities Beneficially Owned Following Reported	Ownersh Form of Derivati Security Direct (I or Indirects)	Ownershi (Instr. 4) O)
			D	ite 1	Expiratio	n n	Amount or Number				
	(Middle) (Zip) 2. Transaction Date (Month/Day/Year) 06/09/2017 Table II - ion 3A. Deemed Execution D any	CZip) 2. Transaction Date (Month/Day/Year) 1. 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Post dia Company (Address	Relationships			
Reporting Owner Name / Address	Director	10% Owner	Officer	Other
SCHOENING DANNY ROBERT 1420 PRESIDENTIAL DRIVE RICHARDSON, TX 75081	X		CEO and Chairman	

Signatures

/s/ Danny Schoening	06/21/2017
**Signature of Reporting Person	Date

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.