FORM 4

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

| OMB APP | ROVAL |
|------------------|-----------|
| DMB Number: | 3235-0287 |
| Estimated averag | ge burden |
| ours per respon | se 0.5 |

Check this box if no 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

| (Print or Ty | pe Response | es) | | | | | | | | | | | | | | | | |
|--|------------------------------------|---------------|----------------------------|--|--------------------------|---------------------------------|-------|--|--------------|---|-----------------------------------|--|--|--|--|-----------------------------|--|---|
| Name and Address of Reporting Person * Minichiello Thomas P. | | | | 2. Issuer Name and Ticker or Trading Symbol WESTELL TECHNOLOGIES INC [WSTL] | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner | | | | | |
| 750 N. C |) OMMONS | (First) DRIVE | (M | liddle) | | ate of Ear 7/2015 | | t Tran | sactio | n (M | onth/Day | y/Year) | | | r (give title belo | | Other (specify b | elow) |
| | | (Street) | | | 4. If | Amendn | nent, | Date | Origi | nal F | iled(Mont | h/Day/Yea | r) | | ual or Joint/ed by One Repo | Group Filing | g(Check Applica | able Line) |
| AUROR | A, IL 60504 | 4 | | | | | | | | | | | | | | One Reporting | Person | |
| (City | ·) | (State) | | (Zip) | | | Tal | ble I - | Non- | Deri | vative S | ecuritie | s Acqu | ired, Disp | osed of, or l | Beneficially | Owned | |
| 1.Title of S (Instr. 3) | Security | | 2. Trans Date (Month | | Exect any | Deemed ution Dat th/Day/Y | ĺ | Code (Inst | | etion V | 4. Secur (A) or I (Instr. 3 | Oisposed , 4 and 5 (A) or | of (D) | Beneficia | nt of Securit lly Owned I Transaction nd 4) | Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| Class A C | Common St | tock | 07/17/2 | 2015 | | | | | (<u>1</u>) | v | 19,382 | | \$ 1.015 | 419,375 | | | D | |
| Class A C | Common St | tock | | | | | | | | | | | | 20,000 | | | I | By IRA |
| 1. Title of Derivative Security (Instr. 3) 2. Conversion Date (Mon Price of Derivative Security | | | n 3. Year) ar | A. Deemed xecution Da | Year) Code (Instr. 8) | | | ies Acquire arrants, opt 5. Number of | | r 6. Date Exercise and Expiration (Month/Day/Ye | | f, or Beneficial ible securities cisable 7.7 and Date Year) Un Sec | | e not req ently valid | uired to re | espond unle ntrol number | er. | (Instr. 4) |
| | | | | | | Code | V | of (D (Instr 4, and | : 3, d 5) | Date Exe | e rcisable | Expirati Date | on Titl | Amount or e Number of Shares | | Transaction (Instr. 4) | (s) (I) (Instr. 4 |) |
| Repor | ting O | wners | | | | | | | | | | | | | | | | |
| D | O N | / | | | | elations | hips | | | | | | | | | | | |
| Keporting | Owner Nan | ne / Address | Directo | 10% Owi | ner (| Officer | | | | | Other | | | | | | | |
| 750 N. C | llo Thomas OMMONS A, IL 6050 | DRIVE | | | | SVP/CF | FO/ | Tres/ | Secre | etary | | | | | | | | |

Signatures

| /s/ Jeniffer Jaynes, by power of attorney | 07/20/2015 |
|---|------------|
| **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).
- (1) Withholding of stock to satisfy statutory tax withholding obligations of vesting of restricted stock units.

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 nu | mber. |
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