FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| | OMB APPROVAL | | | | | | | | |
|---|----------------------|-----------|--|--|--|--|--|--|--|
| | OMB Number: | 3235-0287 | | | | | | | |
| 1 | Estimated average by | urden | | | | | | | |

0.5

hours per response:

| Check this box if no longer subject to |
|----------------------------------------|
| Section 16. Form 4 or Form 5 |
| obligations may continue. See |
| Instruction 1(b). |

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* RUBIN MORRY | | | | | | 2. Issuer Name and Ticker or Trading Symbol FlexShopper, Inc. [FPAY] | | | | | | | | | Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner | | | | |
|------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|----------------------------------------------------|---------------------|-------|-----------------------------------------------------------------------------|---------|--------------------|---------------------------------------------------------|-------------------------|------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|---------------------|-------|-------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|------------------------------------------|--|
| (Last) (First) (Middle) 10801 JOHNSTON ROAD, SUITE 210 | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/08/2014 | | | | | | | | | | cer (give title w) | Ot | ner (specify ow) | |
| (Street) CHARLOTTE NC 28226 (City) (State) (Zip) | | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | ne) X Forr Forr | ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | |
| | | Tabl | e I - Noi | n-Deriva | ative | Sec | curitie | s Ac | quired, | Dis | posed o | f, or | Bene | ficia | lly Own | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | | | Execution Da | | n Date, | Code (Instr. | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5) | | | | d Secui Benef | ficially d Following | 6. Ownersh Form: Direc (D) or Indire (I) (Instr. 4) | of Indirect | |
| | | | | | | | | | Code | v | Amount (A) o | | A) or D) | Price | Trans | action(s) 3 and 4) | | (111511.4) | |
| Common Stock ⁽¹⁾ 05/08/2 | | | | | | 2014 | | A | | 909,091 | | A | \$ <mark>0</mark> . | 55 4, | 901,759 | D | | | |
| | 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) | 3A. Deemed Execution D if any (Month/Day/ | Date, Trans Code | | | | | 6. Date Exercisal Expiration Date (Month/Day/Year | | 9 | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership ct (Instr. 4) | |
| | Code V | | v | (A) | (D) | Date Exercisal | | Expiration Date | Title | or Num of Shai | ber | | | | | | | | |

Explanation of Responses:

1. Excludes 262,000 shares held in trusts in which Mr. Rubin's spouse and father are each a co-trustee and in which he disclaims beneficial ownership. The trusts are for the benefit of Morry Rubin's children and a niece.

Remarks:

<u>/s/ Morry F. Rubin</u> <u>05/09/2014</u>

** 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.