## FORM 4

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

OMB APPROVAL
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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 Type R	esponses)																		
1. Name and Address of Reporting Person * Giordano Rose Ann				2. Issuer Name and Ticker or Trading Symbol DATARAM CORP [DRAM]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner							
(Last) (First) (Middle) 21 OLD VILLAGE ROAD			3. Date of Earliest Transaction (Month/Day/Year) 10/02/2008							Officer (give	title below)		er (specify below	)					
(Street)			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										
ACTON, MA	101/20	(Ctota)	(7:n)																
(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
(Instr. 3)		2. Transaction Date Month/Day/Year	2A. Deemed Execution Date, if any (Month/Day/Year)		, if	(Instr. 8)		(1 (1	4. Securities Acqui (A) or Disposed of (Instr. 3, 4 and 5)		f (D)	D) Owned Follow Transaction(s) (Instr. 3 and 4)		)		Ownership (Form: IDirect (D) (or Indirect (I)	7. Nature of Indirect Beneficial Ownership Instr. 4)		
Common Stock 10/02/2			10/02/2008					Code	9		,000	Δ	Price \$ 1.85	1.000				(Instr. 4)	
Derivative Conversion Da		3. Transaction Date (Month/Day/Yea	3A. Deemed Execution Date any	(e.g., puts, cal		5. Number of Derivative		vative urities quired or posed	Expiration Date Ar (Month/Day/Year) Un Se			7. Tin Amo Unde Secu			Derivative Security (Instr. 5)	Securities Beneficially Owned Following Reported	Ownershi Form of Derivative Security: Direct (D or Indirect		
							(Ins	str. 3, nd 5)						Amount			Transaction (Instr. 4)	(s) (I) (Instr. 4)	
					Code	V	(A)	(D)	Date Exer	e rcisabl		xpiration ate	Title		or Number of Shares				
Options (10/13/2005)	\$ 6.62								09/1	14/20	008 09	9/14/2010	)	nmon ock	6,000		6,000	D	
Options (09/13/2006)	\$ 4.7								09/1	13/20	008 0	9/13/2011		nmon ock	8,000		8,000	D	
Options (09/27/2007)	\$ 3.33								09/2	27/20	008 09	9/27/2012	<i>!</i> .	nmon ock	8,000		8,000	D	
Options (09/25/2008)	\$ 1.99								09/2	25/20	009 09	9/25/2018		nmon ock	16,000		16,000	D	
Reportin	ıg Owı	ners																	

B (1 0 N (41)	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Giordano Rose Ann 21 OLD VILLAGE ROAD ACTON, MA 01720	X						

## **Signatures**

Rose Ann Giordano	10/16/2008
**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.

