FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0104

Estimated average burden

0.5

hours per response:

INITIAL STATEMENT OF 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. Name and Address of Reporting Person* Shan Helen L.			. Date of Event Requiring Stater Month/Day/Yea	nent	3. Issuer Name and Ticker or Trading Symbol EPAM Systems, Inc. [EPAM]						
(Last) (First) (Middle)			09/22/2018		Relationship of Reporting Pers (Check all applicable)			(Mo	5. If Amendment, Date of Original Filed (Month/Day/Year)		
	YSTEMS, INC. ITY DRIVE SU PA (State)	18940 (Zip)			X	Director Officer (give title below)	10% Owne Other (spe below)	ecify Ap	plicable Line) X Form filed b Person	nt/Group Filing (Check by One Reporting by More than One Person	
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)						ally Owned (Instr. 4)	1		4. Nature of Indirect Beneficial Ownership (Instr. 5)		
No securities are beneficially owned						0	D				
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
1. Title of Derivative Security (Instr. 4) 2. Date Exercisable a Expiration Date (Month/Day/Year)			ite	nd 3. Title and Amount of Secur Underlying Derivative Secur 4)			4. Conversion	Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)		
			Date Exercisable	Expiration Date	Title		Amount or Number of Shares	Exercise Price of Derivative Security	Direct (D) or Indirect (I) (Instr. 5)		

Explanation of Responses:

Remarks:

/s/ Kate Pytlewski, as Attorney-in-Fact 09/25/2018

** Signature of Reporting Person Date

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

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.

 $^{^{\}star}$ If the form is filed by more than one reporting person, see Instruction 5 (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).