FORM 4

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

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

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OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response... 0.5

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 Typ	e Responses)														
1. Name and Address of Reporting Person *- HOROWITZ COREY M				2. Issuer Name and Ticker or Trading Symbol NETWORK 1 TECHNOLOGIES INC [NTIP- NYSE]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director _X_ Officer (give title below) Other (specify below)				
(Last) (First) (Middle) 6 BROOKLAWN DRIVE				3. Date of Earliest Transaction (Month/Day/Year) 07/14/2016									CEO	and Chairm	an	
(Street) WESTPORT, CT 06880				4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting PersonForm filed by More than One Reporting Person					
(City) (State) (Zip)			(Zip)	Table I - Non-Derivative Securities Acqui						es Acquir	ired, Disposed of, or Beneficially Owned					
1.Title of Se (Instr. 3)	ecurity		2. Transaction Date (Month/Day/Year)		n Da	Year)			A) or	Disposed 3, 4 and 5 (A) or (D)	1 of (D) C 5) T	Amount of wned Follov ransaction(s) nstr. 3 and 4	ving Reporte	ed	Form:	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Table II - I					contain form di	ned i ispla osed o	n this for	rm are nerently va	lid OMB co	to respon	id unless th		1474 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	sion Date cise (Month/Day/Year) f ive	3A. Deemed Execution Date, if	4. if Transaction Code		5. Number of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)	Securities Beneficially Owned Following Reported Transaction(s)	Owners Form o Derivat Security Direct (or Indir	O) ct	
				Code	V	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4)
Restricted Stock Units	<u>(1)</u>	07/14/2016		A		750,000		<u>(2)</u>		<u>(2)</u>	Commo Stock	1750 000	<u>(1)</u>	750,000	D	

Reporting Owners

D (1 0 N / 11)	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
HOROWITZ COREY M 6 BROOKLAWN DRIVE WESTPORT, CT 06880	X	X	CEO and Chairman					

Signatures

By: /s/ Corey M. Horowitz	07/18/2016
**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).
- The restricted stock units (RSUs) were granted pursuant to an Employment Agreement, dated July 14, 2016, between the Company and Mr. Horowitz, for a five-year term beginning (1) July 14, 2016 and ending July 14, 2021 (the "Term"). Each restricted stock unit represents a right to receive one share of common stock, subject to the vesting provisions described below.
 - The RSUs shall vest in three tranches and all RSUs shall be subject to continued employment through the applicable vesting date. The RSUs shall vest as follows: (i) 250,000 RSUs shall vest on July 14, 2018; (ii) 250,000 RSUs shall vest in equal annual installments over the remaining Term, beginning at any time after July 14, 2018 when and if the Company's
- (2) Common Stock achieves a closing price of a minimum of \$3.25 per share for 20 consecutive trading days and (iii) 250,000 RSUs shall vest in equal annual installments over the remaining Term, starting at any time after July 14, 2018 when and if the Company's Common Stock achieves a closing price of a minimum of \$4.25 per share for 20 consecutive trading days. Further, all of the RSUs become fully vested upon a Change of Control, or upon the Company's termination of Mr. Horowitz's employment Other Than for Cause, or upon Mr. Horowitz's termination of his employment for Good Reason (all as defined in the Employment Agreement).

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.