

(Print or Type Responses)

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Workington D. C. 20540

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL				
OMB	3235-			
Number:	0104			
Estimated average				
burden hours per				
response	0.5			

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 *	State	Statement		3. Issuer Name and Ticker or Trading Symbol NETWORK 1 SECURITY SOLUTIONS INC [NSSI.PK]				
GRAIFMAN ROBERT	,	(Month/Day/Year)		[22.0.0.]				
(Last) (First) (Mid C/O SKYFARM MANAGEMENT, LLC, 31 GROSVENOR ROAD	dle) 12/2	12/22/2003		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_Director Officer (give Other (specify				
(Street) SHORT HILLS, NJ 07078			title belov	v)	below)		Filing(Che _X_ Form fil	ual or Joint/Group ck Applicable Line) ed by One Reporting Person ed by More than One Reporting
(City) (State) (Z	ip)	Tabl	le I - Non-Dei	rivative	Securities	s Ben	eficially	Owned
1.Title of Security (Instr. 4)		2. Amount of Beneficially ((Instr. 4)		Ov Fo (D Inc		Owne	Nature of Indirect Beneficial rnership str. 5)	
Common Stock, \$.01 par value per share		54,7	77	D				
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. 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 control number. Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)								
		Exercisable and tion Date 3. Title Securiti		nd Amount of s Underlying re Security A. Conversion or Exercise Price of		5. on Ove	5.	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivative Security	Di or (I)	Security: Direct (D) or Indirect	
Option to Purchase Common Stock	(1)	12/22/2013	Common Stock, \$.01 par value per share	50,000	\$ 0.21		D	

Reporting Owners

Panarting Owner Name / Address	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
GRAIFMAN ROBERT						
C/O SKYFARM MANAGEMENT, LLC	X					
31 GROSVENOR ROAD	Λ					
SHORT HILLS, NJ 07078						

Signatures

/s/ Graifman, Robert	12/30/2003
**Signature of Reporting Person	Date

Explanation of Responses:

- * 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).
- (1) The shares underlying the Option shall vest on a quarterly basis in equal amounts of 12,500 shares per quarter beginning 90 days after the date of the grant (12/22/03).

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.