FORM 4

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

OMB APPROVAL						
DMB Number:	3235-0287					
Estimated average burden						
ours per respon-	se 0.5					

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

1 Name ar		es)												
1. Name and Address of Reporting Person * HOROWITZ COREY M			2. Issuer Name and Ticker or Trading Symbol NETWORK 1 SECURITY SOLUTIONS INC [NSSI-OTC]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director _X_ Officer (give title below) Other (specify below)					
(Last) (First) (Middle) C/O CMH CAPITAL MANAGEMENT CORP., 445 PARK AVENUE, SUITE 1028			3. Date of Earliest Transaction (Month/Day/Year) 09/08/2006							CE	EO and Chai	rman		
(Street) NEW YORK, NY 10022				4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person X_Form filed by More than One Reporting Person				
(City	7)	(State)	(Zip)	,	Table I - Non-Derivative Securities Acquired				red, Disp	osed of, or l	Beneficially	Owned		
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date any (Month/Day/Ye	e, if Cod (Inst		4. Securities Acquire (A) or Disposed of (Instr. 3, 4 and 5)		of (D)	Beneficia	nt of Securities lly Owned Following Transaction(s)		6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership
				(National Buy) 1		ode	V Amou	(A) or (D)	Price	(msur s c			or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock, \$.01 par value per share 09/08/2006			;	S	400,0	000 D	\$ 1.1	2,467,800		Ι	See Footnote			
			•						il	<u> </u>			•	
Reminder: indirectly.	Report on a	separate line f	or each class of sec	urities beneficial	ly owned	direct	ly or							
	Report on a	separate line f	or each class of sec	urities beneficial	ly owned	P	Persons wontained	in this fo	rm are	e not req	ection of in uired to re d OMB cor	spond un	less	EC 1474 (9- 02)
	Report on a	separate line f	Table II - l	urities beneficial Derivative Secu	rities Ac	P c tl	Persons we contained the form d	in this fo isplays a of, or Ber	rm are curre reficial	e not req ntly valid	uired to re d OMB cor	spond un	less	,
1. Title of Derivative Security	2. Conversion	3. Transactio	Table II - 1 n 3A. Deemed Execution D Year) any	Derivative Secu	rities Ac warrant 5. Nu on of	quired s, option ative (ities ired rosed) . 3,	Persons we contained the form d	in this for isplays a of, or Bernstible securitible securition Date	rm are curre neficial rities) 7. To Amo Und Secu	e not req ntly valid	uired to red OMB cor	spond un	of 10. Owners Form of Security Direct (or Indir	11. Natur of Indire Beneficia Ownersh (Instr. 4)

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
HOROWITZ COREY M C/O CMH CAPITAL MANAGEMENT CORP. 445 PARK AVENUE, SUITE 1028 NEW YORK, NY 10022	X	X	CEO and Chairman			
CMH CAPITAL MANAGEMENT CORP 885 THIRD AVENUE NEW YORK, NY 10021		Х				

Signatures

By: /s/ Corey M. Horowitz	09/12/2006
**Signature of Reporting Person	Date
By: /s/ Corey M. Horowitz for CMH Capital Management	09/12/2006
**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).
- (1) On September 8, 2006, CMH Capital Management Corp., an entity owned and controlled by Mr. Horowitz, sold 400,000 shares of common stock.

Remarks:

This is a joint filing of Form 4 by Corey M. Horowitz and CMH Capital Management Corp., an entity owned and controlled by Mr. Horowitz.

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.