Edgar Filing: ISSUER DIRECT CORP - Form 4

ISSUER DIR	RECT CORP										
Form 4											
November 13	3, 2014										
FORM	1 4								OMB AF	PPROVAL	
	UNIII	ED STATES		RITIES A shington,			NGE C	COMMISSION	OMB Number:	3235-0287	
Check thi									Expires:	January 31,	
if no longer subject to STATEMENT OF CH				GES IN	BENEF	ICIA	LOW	NERSHIP OF	Estimated a	2005	
Section 16.				SECURITIES					burden hours per		
	Form 4 or								response	. 0.5	
Form 5 obligation		^					•	e Act of 1934,			
may cont	Section			•	•	- ·		1935 or Section	n		
<i>See</i> Instru 1(b).		30(h)	of the In	vestment	Compan	y Ac	t of 194	-0			
(Print or Type R	Responses)										
Michael James Symbol				uer Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer			
			ISSUEF	JER DIRECT CORP [ISDR]							
(Last) (First) (Middle) 3			3. Date of	3. Date of Earliest Transaction				(Check all applicable)			
	. ,	. ,	(Month/D					Director	X 10%	6 Owner	
			11/07/2	•				Officer (give title Other (specify			
DRIVE, SU	ITE D							below)	below)		
			4. If Ame	4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check Applicable Line)			
				Month/Day/Year)							
								X Form filed by C			
MORRISVI	LLE, NC 275	60						Form filed by M Person	fore than One Ke	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction			3.	4. Securi			5. Amount of	6. Ownership		
Security	(Month/Day/Ye		n Date, if	Transactio		•		Securities	Form: Direct		
(Instr. 3)		any (Month/I	Code (Instr. 3, 4 and 2 Day/Year) (Instr. 8)			5)	Beneficially Owned Following	(D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
						(A)		Reported Transaction(s)			
				Col V	A	or	D.:'	(Instr. 3 and 4)			
Common				Code V	Amount	(D)	Price \$				
Stock	11/07/2014			S <u>(1)</u>	4,500	D	پ 10.31	259,600	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 Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Common Stock Options	\$ 2.31	11/07/2014		X <u>(1)</u>		1,500	08/09/2011	08/09/2015	Common Stock	1,500
Common Stock Options	\$ 1.87	11/07/2014		X <u>(1)</u>		3,000	05/24/2012	05/24/2016	Common Stock	3,000

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Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Michael James 500 PERIMETER PARK DRIVE SUITE D MORRISVILLE, NC 27560		Х				
Signatures						

Signatures

/s/ James Michael 11/13/2014 <u>**</u>Signature of Date Reporting Person

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) Exercised options to purchase 3,000 shares of common stock at \$1.87 per share, and 1,500 options to purchase shares of common stock at \$2.31 per share. The shares issued were sold on the same day at \$10.31 per share.

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.