Edgar Filing: Doctor David A - Form 4

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Form 4												
October 24, 2	_								OMB A	PPROVAL		
FORM		ITIES Al hington, 1		COMMISSION	OMB Number:	3235-0287						
Check thi if no long	ter.								Expires:	January 31, 2005		
subject to Section 1 Form 4 or	F CHANGES IN BENEFICIAL OW SECURITIES						Estimated a burden hour response	average Irs per				
Form 5 obligation may cont <i>See</i> Instru 1(b).	ns Section 1	7(a) of the		ility Hold	ing Com	pany	Act o	ge Act of 1934, f 1935 or Sectio 40	on			
(Print or Type F	Responses)											
			Symbol	2. Issuer Name and Ticker or Trading Symbol BLUE SPHERE CORP. [BLSP]					5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction					(Che	eck all applicable)			
((Month/Day/Year) 10/17/2017					_X_Director10% Owner Officer (give titleOther (specify below)Other (specify				
				Amendment, Date Original d(Month/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 				
CHARLOT	TE, NC 28262							Form filed by I Person	More than One R	eporting		
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	Securi	ties Ac	quired, Disposed o	of, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	any		emed 3.		4. Securities ionAcquired (A) or Disposed of (D)			5. Amount of Securities Beneficially Owned		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common					Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				
Common Stock, par value \$0.001 per share	10/17/2017			А	5,708 (1)	A	<u>(1)</u>	12,595	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.

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 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. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address					
Fee	Director	10% Owner	Officer	Other	
Doctor David A 301 MCCULLOUGH DR., 4TH FLOOR CHARLOTTE, NC 28262		Х			
Signatures					
/s/ David A Doctor	10/22/2017				
<u>**</u> 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) The 5,708 shares were issued pursuant to the Company's Amended and Restated Non-Employee Directors Compensation Plan, for services rendered to the Company's Board of Directors during the third quarter of 2017.

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.