## Edgar Filing: Doron Michael J - Form 4

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| Form 4  |  |             |   |   |              |                  |  |   |   |           |  |  |
|---|--|-------------|---|---|--------------|------------------|--|---|---|-----------|--|--|
| April 05, 201   |  |             |   |   |              |                  |  |   | OMB APPROVAL  |           |  |  |
|   | <b>ORM 4</b> UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 |             |   |   |              |                  |  |   | OMB<br>Number:  | 3235-0287 |  |  |
| Check thi<br>if no long<br>subject to<br>Section 10<br>Form 4 or    | F CHANGES IN BENEFICIAL OWNERSHIP OF<br>SECURITIES                                   |             |   |   |              |                  | Expires: January 31<br>2005<br>Estimated average<br>burden hours per<br>response 0.5 |   |   |           |  |  |
| Form 5<br>obligatior<br>may conti<br><i>See</i> Instru<br>1(b).     | nue. Section 1   | 7(a) of the | Public Ut   |   | ing Com      | pany             | Act o  | ge Act of 1934,<br>f 1935 or Sectio<br>40   | n   |           |  |  |
| (Print or Type R  | esponses)  |             |   |   |              |                  |  |   |   |           |  |  |
| 1. Name and Address of Reporting Person <u>*</u><br>Doron Michael J |  |             | 2. Issuer Name <b>and</b> Ticker or Trading<br>Symbol<br>MusclePharm Corp [MSLP.OB] |   |              |                  |  | 5. Relationship of Reporting Person(s) to<br>Issuer<br>(Check all applicable)                           |   |           |  |  |
| (Last)  | (First)  | (Middle)    | 3. Date of Earliest Transaction   |   |              |                  |  |   |   |           |  |  |
|   |  |             |   | (Month/Day/Year)<br>02/14/2013  |              |                  |  |   | _X_ Director      10% Owner        Officer (give title      Other (specify below) |           |  |  |
|   | (Street)   |             | 4. If Amendment, Date Original<br>Filed(Month/Day/Year)                             |   |              |                  |  | 6. Individual or Joint/Group Filing(Check<br>Applicable Line)<br>_X_ Form filed by One Reporting Person |   |           |  |  |
| SALT LAK  | E CITY, UT 84  | 4111        |   |   |              |                  |  | Form filed by M<br>Person   | More than One R   | eporting  |  |  |
| (City)  | (State)  | (Zip)       | Table   | e I - Non-De  | erivative S  | Securi           | ties Ac  | quired, Disposed of   | f, or Beneficia   | lly Owned |  |  |
| 1.Title of<br>Security<br>(Instr. 3)                                | any  |             | emed<br>on Date, if<br>/Day/Year)   | 3.4. SecuritiesTransactionAcquired (A) orCodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5) |              | )                | Beneficially<br>Owned  | 6. Ownership<br>Form: Direct<br>D) or<br>ndirect (I)<br>Instr. 4)                                       | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4)                 |           |  |  |
|   |  |             |   | Code V  | Amount       | (A)<br>or<br>(D) | Price  | Reported<br>Transaction(s)<br>(Instr. 3 and 4)  |   |           |  |  |
| Common<br>Stock   | 02/14/2013   |             |   | A   | 6,252<br>(1) | A                | ( <u>2</u> )   | 6,605   | D   |           |  |  |
| Common<br>Stock   | 02/14/2013   |             |   | А   | 132          | А                | <u>(3)</u>   | 6,737   | 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<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 4.<br>Transactio<br>Code<br>(Instr. 8) | 5.<br>onNumber<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3,<br>4, and 5) |                     |                    | Amou<br>Unde<br>Secur | rlying                                 | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secur<br>Bene<br>Owne<br>Follo<br>Repo<br>Trans<br>(Instr |
|---|---|---|--|---|---------------------|--------------------|-----------------------|--|---|---|
|   |   |   | Code V                                 | (A) (D)   | Date<br>Exercisable | Expiration<br>Date | Title                 | Amount<br>or<br>Number<br>of<br>Shares |   |   |

## **Reporting Owners**

| Reporting Owner Name / Address  |      | Relationships |           |         |       |  |  |  |  |
|---|------|---------------|-----------|---------|-------|--|--|--|--|
|   |      | Director      | 10% Owner | Officer | Other |  |  |  |  |
| Doron Michael J<br>175 S. MAIN STREF<br>15TH FLOOR<br>SALT LAKE CITY, |      | Х             |           |         |       |  |  |  |  |
| Signatures  |      |               |           |         |       |  |  |  |  |
| /s/ Michael<br>Doron  | 04/0 | 5/2013        |           |         |       |  |  |  |  |
| <u>**</u> Signature of<br>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) 6,252 shares of common stock shall vest equally on March 31, 2013, June 30, 2013, September 30, 2013 and December 31, 2013, subject to Mr. Doron's continued service as a director.
- (2) The shares are issued as compensation for service of Mr. Doron.
- (3) The shares are issued as makeup shares for the shortfall in Mr. Doron's 2012 stock grant.

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.