

NETWORK CN INC  
Form 3  
April 13, 2017

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0104  
Expires: January 31, 2005  
Estimated average burden hours per response... 0.5

**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,  
Section 17(a) of the Public Utility Holding Company Act of 1935 or Section  
30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person \*

Â CHENG Sze Ki Shirley  
(Last) (First) (Middle)

C/O 21/F, ONE HARBOUR SQUARE,Â 181 HOI BUN RD, KWUN TONG

(Street)

HONG KONG,Â F4Â 00000

(City) (State) (Zip)

2. Date of Event Requiring Statement

(Month/Day/Year)  
02/23/2015

3. Issuer Name and Ticker or Trading Symbol  
NETWORK CN INC [NWCN.OB]

4. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

Director  10% Owner  
 Officer  Other  
(give title below) (specify below)  
Chief Financial Officer

5. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)  
 Form filed by One Reporting Person  
 Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock \$0.001 par value	13,333 <sup>(1)</sup>	D	Â
Common Stock \$0.001 par value	13,333 <sup>(2)</sup>	D	Â

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

SEC 1473 (7-02)

**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)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security	4. Conversion or Exercise	5. Ownership Form of	6. Nature of Indirect Beneficial Ownership (Instr. 5)
---	---	--	---------------------------	----------------------	--

Edgar Filing: NETWORK CN INC - Form 3

Date Exercisable	Expiration Date	(Instr. 4)	Amount or Number of Shares	Price of Derivative Security	Derivative
		Title			Security: Direct (D) or Indirect (I)

(Instr. 5)

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
CHENG Sze Ki Shirley C/O 21/F, ONE HARBOUR SQUARE 181 HOI BUN RD, KWUN TONG HONG KONG, F4 00000	X		Chief Financial Officer	

## Signatures

/s/ Shirley Chen  
Sze Ki

04/13/2017

                     Date

\*\*Signature of Reporting Person

## 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) On August 28, 2015, the reporting person received an aggregate award of 13,333 shares of the Issuer's common stock, as consideration for services rendered as a director, between August 28, 2015 and June 30, 2016, so long as the reporting person continues in his role as a director of the Issuer on June 30, 2016, the scheduled vesting date.
    - (2) On February 23, 2015, the reporting person received an aggregate award of 13,333 shares of the Issuer's common stock, as consideration for services rendered as a director, between February 23, 2015 and June 30, 2015, so long as the reporting person continues in his role as a director of the Issuer on June 30, 2015, the scheduled vesting date.
- 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.