

ISSUER DIRECT CORP  
 Form 3  
 November 23, 2015

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

OMB APPROVAL  
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**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 *		2. Date of Event Requiring Statement	3. Issuer Name <b>and</b> Ticker or Trading Symbol	
Â Knerr Steven Winfield		(Month/Day/Year)	ISSUER DIRECT CORP [ISDR]	
(Last)	(First)	(Middle)	4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
500 PERIMETER PARK DRIVE,Â SUITE D		11/19/2015	(Check all applicable)	
(Street)			<input type="checkbox"/> Director	<input type="checkbox"/> 10% Owner
MORRISVILLE,Â NCÂ 27560			<input checked="" type="checkbox"/> Officer	<input type="checkbox"/> Other
(City)	(State)	(Zip)	(give title below)	(specify below)
			Chief Financial Officer	6. Individual or Joint/Group Filing(Check Applicable Line)
				<input checked="" type="checkbox"/> Form filed by One Reporting Person
				<input type="checkbox"/> 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)
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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 (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect (I)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	

(Instr. 5)

Options to Purchase Common Stock	10/01/2013	09/27/2023	Common Stock	20,000 <sup>(1)</sup>	\$ 7.76	D	Â
Restricted Stock Unit	04/01/2016	Â <sup>(3)</sup>	Common Stock	10,000 <sup>(2)</sup>	\$ 0	D	Â
Options to Purchase Common Stock	11/19/2015	11/19/2025	Common Stock	10,000 <sup>(4)</sup>	\$ 6.8	D	Â

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Knerr Steven Winfield 500 PERIMETER PARK DRIVE SUITE D MORRISVILLE, NC 27560	Â	Â	Â Chief Financial Officer	Â

## Signatures

/s/Steven Knerr                      11/19/2015  
 \_\_Signature of                      Date  
 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) These options vest as follows: 1/16 in equal quarterly installments over a 4 year period beginning on October 1, 2013. The Reporting Person must be an employee of the Company as of each vesting date.
  - (2) The restricted stock unit vests as follows: (i) 5,000 shares on April 1, 2016 and (ii) 5,000 shares on April 1, 2017. The Reporting Person must be an employee of the Company as of each vesting date.
  - (3) N/A
  - (4) These options vest as follows: (i) 25% on November 19, 2016 and (ii) the remaining 75% in twelve successive equal installments at the end of each calendar quarter thereafter for the subsequent 3 year period. The Reporting Person must be an employee of the Company as of each 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.