TSR INC Form 3 February 02, 2016 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB APPROVAL FORM 3 Washington, D.C. 20549 OMB Number:

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 <u>*</u> Mangan Brian | | | 2. Date of Event Rec Statement (Month/Day/Year) | | 3. Issuer Name and Ticker or Trading Symbol TSR INC [TSRI] | | | | | | |
|--|-----------------|-----------------|---|--|---|------------------------------------|---|---|--|--|--|
| (Last) | (First) | (Middle) | 01/28/2016 | 4. Relationship of Reporting Person(s) to Issuer | | | 5. If Amendment, Date Original Filed(Month/Day/Year) | | | | |
| 45 DUNE C | COURT | | | | | | | 1.2 aj, 10al) | | | |
| (Street) | | | | (Check | (Check all applicable) | | | 6. Individual or Joint/Group | | | |
| NORTHPO | RT, NYÂ | 11768 | | Officer | X_Director10% Owner OfficerOther (give title below) (specify below) | | Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| (City) | (State) | (Zip) | Tabl | e I - Non-Derivati | ive Securitie | es Benef | eneficially Owned | | | | |
| 1.Title of Secu (Instr. 4) | rity | | | nount of Securities ficially Owned . 4) | Ownership | 4. Nature Ownersh (Instr. 5) | ip | ect Beneficial | | | |
| Reminder: Rep owned directly | | ate line for ea | ch class of securities b | peneficially SI | EC 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 (<i>e.g.</i> , puts, calls, warrants, options, convertible securities) | | | | | | | | | | | |
| | | | Thes benchedany ow | neu (e.g., puts, cans, | warrants, opti | .0115, COII (| ver tible : | (curnes) | | | |
| 1. Title of Deri (Instr. 4) | ivative Securit | Expi | ration Date S | 3. Title and Amount of Securities Underlying Derivative Security | 4. Conversio or Exercis | | ership 1 of | 6. Nature of Indirect Beneficial Ownership (Instr. 5) | | | |

(Instr. 4)

Title

Expiration

Date

Date

Exercisable

Derivative

Security:

Direct (D)

or Indirect

(Instr. 5)

(I)

Price of Derivative

Security

Amount or

Number of

Shares

3235-0104

January 31,

2005

0.5

Expires:

response ...

Estimated average burden hours per

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | |
|--|---------------|-----------|---------|-------|--|--|
| 1 8 | Director | 10% Owner | Officer | Other | | |
| Mangan Brian 45 DUNE COURT NORTHPORT, NY 11768 | ÂX | Â | Â | Â | | |
| Signatures | | | | | | |
| /s/ Brian 01/2 Mangan | 30/2016 | | | | | |
| **Signature of Reporting Person | Date | | | | | |

Explanation of Responses:

No securities are beneficially owned

* 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).

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.