Cinedigm Co Form 4	orp.									
March 29, 20	)17									
								OMB APPROVAL		
	UNITED S	Washington, D.C. 20549						3235-0287		
Check thi if no long subject to Section 1 Form 4 or Form 5 obligation may cont <i>See</i> Instru 1(b).	6. Filed purs Section 17(a)	STATEMENT OF CHANGES IN 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 20(b) of the Investment Company Act of 1040								
(Print or Type F	Responses)									
BROWN PETER C Symbol			er Name <b>and</b> gm Corp. [		Frading	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last)	(First) (M		3. Date of Earliest Transaction							
(Mon 801 WEST 47TH STREET, SUITE 03/0 400			Day/Year) 2017			X_ Director10% Owner Officer (give titleOther (specify below) below)				
	endment, Date Original nth/Day/Year)			<ul><li>6. Individual or Joint/Group Filing(Check</li><li>Applicable Line)</li><li>_X_ Form filed by One Reporting Person</li></ul>						
KANSAS CITY, MO 64112 Form filed by More than One Reporting Person							eporting			
(City)	(State) (Z	Zip) Tal	ole I - Non-D	erivative S	ecurities A	cquired, Disposed o	f, or Beneficial	lly Owned		
1.Title of Security (Instr. 3)	curity (Month/Day/Year) Execution Date, if		Code	on(A) or Dis (D) (Instr. 3, 4	sposed of	d 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
Class A Common Stock	03/06/2017		A	24,631 (2)	A \$0		D			
Class A Common Stock						92,067 <u>(3)</u>	I	See foonote (1)		

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.

## Edgar Filing: Cinedigm Corp. - Form 4

 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)	4. Transactio Code (Instr. 8)	5. onNumber 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**

<b>Reporting Owner Name / Address</b>	Relationships						
	Director	10% Owner	Officer	Other			
BROWN PETER C 801 WEST 47TH STREET SUITE 400 KANSAS CITY, MO 64112	х						
Signatures							
/s/ Peter C. 03 Brown 03	3/29/2017						
**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) Shares are held by Grassmere Partners, LLC, of which the Reporting Person is Chairman. The Reporting Person disclaims beneficial ownership of the shares except to the extent of any pecuniary interest therein.

Constitutes stock portion of annual retainer for the year of board service by the Reporting Person commencing October 1, 2016. Such(2) shares vest in quarterly amounts on December 31, 2016, March 31, 2017, June 30, 2017 and September 30, 2017, so long as the Reporting Person is a director on each such date.

(3) Reflects internal adjustment of shares held by the Reporting Person directly and through Grassmere Partners, LLC.

## **Remarks:**

All share and price amounts reflect the 1-for-10 reverse stock split effected on May 9, 2016.

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.