RISS PAUL H Form 4

December 12, 2011

FORM 4

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

OMB 3235-0287 Number:

Estimated average

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

January 31, Expires: 2005

OMB APPROVAL

Form 4 or Form 5 obligations may continue.

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

burden hours per response... 0.5

See Instruction 1(b).

(Print or Type Responses)

| 1. Name and Address of Reporting Person * RISS PAUL H | | | 2. Issuer Name and Ticker or Trading Symbol PERVASIP CORP [PVSP] | 5. Relationship of Reporting Person(s) to Issuer | | |
|---|------------|----------|--|---|--|--|
| (Last) (First) (Middle | | (Middle) | 3. Date of Earliest Transaction | (Check all applicable) | | |
| 75 SOUTH BI 400 | ROADWAY | , SUITE | (Month/Day/Year) 12/09/2011 | _X_ Director 10% Owner _X_ Officer (give title Other (specibelow) below) CHIEF EXECUTIVE OFFICE | | |
| | (Street) | | 4. If Amendment, Date Original Filed(Month/Day/Year) | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | |
| WHITE PLAI | NS, NY 106 | 01 | | Form filed by More than One Reporting Person | | |

WHITE PLAINS, NY 10601

| (City) | (State) | (Zip) Tab | le I - Non- | Derivative S | Securit | ties Acq | uired, Disposed | of, or Benefic | ially Owned |
|--------------------------------|---|---|---|--------------|------------------|------------|---|-------------------|---|
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) | | | of (D) | 5. Amount of Securities Ownership Beneficially Form: Owned Direct (D) Following or Indirect | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | Code V | Amount | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | (I) (Instr. 4) | |
| Common Stock | 12/09/2011 | | A | 750,000 | A | \$ 0.02 | 3,476,833 | D | |
| Common Stock | | | | | | | 455,700 | I | Irrevocable Trusts |

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

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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 Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 4. Transactic Code (Instr. 8) | 5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr |
|---|---|---|--|---|--|--------------------|---|--|---|
| | | | Code V | 4, and 5) (A) (D) | Date Exercisable | Expiration Date | Amou or Title Numb of Share | ber | |

Reporting Owners

| Panarting Owner Name / Address | Relationships |
|--------------------------------|---------------|
| | |

Director 10% Owner Officer Other

RISS PAUL H 75 SOUTH BROADWAY SUITE 400

X CHIEF EXECUTIVE OFFICE

WHITE PLAINS, NY 10601

Signatures

/s/ Paul H. Riss 12/12/2011

**Signature of Pate 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).

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.

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