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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response...

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

1. Name and Address of Reporting Person *

(Print or Type Responses)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading Symbol

Shetty Mahesh S				SG BLOCKS, INC. [SGBX*]							v	(Check all applicable) X Director 10% Owner				
(Last) (First) (Middle) C/O SG BLOCKS, INC., 195 MONTAGUE STREET				3. Date of Earliest Transaction (Month/Day/Year) 01/31/2017							X Officer (give title below) Other (specify below) CFO					
(Street) BROOKLYN, NY 11201				4. If Amendment, Date Original Filed(Month/Day/Year)							_X_ F	6. Individual or Joint/Group Filing(Check Applicable Line) X_Form filed by One Reporting Person Form filed by More than One Reporting Person				
(Ci	ty)	(State)	(Zip)			Ta	able l	I - Non-Der	ivativ	e Securities	Acquired,	Disposed (of, or Benef	icially Owner	i	
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year		2A. Deemed Execution Date, if r) any (Month/Day/Year)		ite, if	(Instr. 8)		(A) o	r Disposed of 3, 4 and 5) (A) or (D)	C(D) Owner Trans	Oy Owned Following Reported Transaction(s) (Instr. 3 and 4)		I C F E o	ownership or orm: Beirect (D) Or Indirect (I	. Nature f Indirect eneficial wnership instr. 4)		
Reminder:	Report on a	separate line for eac		Derivat	ive Sec	curitie	s Acc	Perso in this displa quired, Dis	ons was formalys a	ho respond n are not re currently v of, or Benefitible securit	quired to alid OMB icially Own	respond control r	unless the	tion contain e form	ed SEC 14	174 (9-02)
1. Title of Derivative Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. 5. Num Transaction of Code Deriva		Numb f Perivati ecuritie cquire (A) or ispose (D) nstr. 3,	aber 6. Date Exe Expiration (Month/Date sed of		ercisable and Date		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative I Security S (Instr. 5) F G	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Form of Derivative Security: Direct (D) or Indirect	(Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	;	Expiration Date	Title	Amount or Number of Shares				
Stock Option (right to buy)	\$ 3	01/31/2017		A		3,200 (1)		01/31/203	17 ⁽²⁾	01/31/2027	Common Stock	13,200	\$ 0 (4)	48,373	D	

Reporting Owners

P. (1. O. N. /AII	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Shetty Mahesh S C/O SG BLOCKS, INC., 195 MONTAGUE STREET BROOKLYN, NY 11201	X		CFO			

Signatures

/s/ Mahesh Shetty	02/02/2017			
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) The securities reported herein are presented to give effect to a 1-for-3 reverse stock split to be completed by the Company after the filing of this report.
- (2) The options were issued under the issuer's stock incentive plan and vested in full on the grant date.
- (3) The options were issued under the issuer's stock incentive plan and will vest in equal quarterly installments over two years from the grant date so long as the reporting person remains an employee of the issuer.
- (4) The options were granted under the issuer's stock incentive plan and without payment of consideration in connection with the reporting person's employment with the issuer.

Remarks:

* The issuer intends to apply for quotation or listing under this symbol in the future.

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.