Verso Corp Form 3

July 15, 2016	-)														
FORM	3 ^{UNI}	TED STA'	TES SECURITIES AND EXCHANGE COMMISSI					SION	N OMB APPROVAL						
Washin					ngton, D.C. 20549				OMB Number:	3235-	0104				
	F	Expires:	Janua	ry 31, 2005											
SECURITIES										Estimated average burden hours per					
	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, response 0.5 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 R	lesponses)														
1. Name and Address of Reporting Person <u>*</u> SHUSTER JAY			2. Date of Event R Statement (Month/Day/Year)		3. Issuer Name and Ticker or Trading Symbol Verso Corp [VRS]										
(Last)	(First)	(Middle)	07/15/2016		4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)							
6775 LENO COURT, SU		R			(Check	all applicabl	e)								
	(Street)				X Director Officer (give title below	Oth		Filing	vidual or Join (Check Applica) orm filed by On	ble Line)	g				
MEMPHIS,	TN 38	115						Person Fo	rm filed by Mo ing Person	-	-				
(City)	(State)	(Zip)	Tal	ole I - N	lon-Derivat	ive Securi	ties Be	neficia	ally Owned	1					
1.Title of Security (Instr. 4)			2. Amount of Securities Beneficially Owned (Instr. 4)			3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	t (D) irrect								
Reminder: Repo owned directly	-	rate line for ea	ch class of securities	s benefici	ally S	EC 1473 (7-()2)								
	inforn requir	nation conta red to respo	pond to the colled ained in this form nd unless the for MB control numbe	are not m displ											
Т	able II - Dei	rivative Secu	rities Beneficially O	wned (e.	g., puts, calls,	warrants, o	ptions, c	converti	ble securities	;)					
1. Title of Deri (Instr. 4)	vative Securi	Expir	nte Exercisable and ration Date /Day/Year)	Securiti	and Amount of es Underlying ve Security)	4. Conversor or Exer Price of	cise Fo	wnershi orm of erivativ	ip Benefici (Instr. 5)	e of Indire al Owners					

Expiration Title

Date

Exercisable Date

Security:

Direct (D)

or Indirect

(I)

Derivative

Security

Amount or

Number of

Shares

(Instr. 5)

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
SHUSTER JAY 6775 LENOX CENTER COURT, SUITE MEMPHIS, TN 38115	400	ÂX	Â	Â	Â		
Signatures							
/s/ Peter H. Kesser, Attorney-in-Fact	7/15/2	016					
**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).

Â **Remarks:** Exhibit List

Exhibit Â 24 - Confirming Statement

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.