FORM 4

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

OMB APPROVAL						
OMB Number: 32	235-0287					
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

	pe Response														
Name and Address of Reporting Person * Mathews Michael			2. Issuer Name and Ticker or Trading Symbol ASPEN GROUP, INC. [ASPU] 3. Date of Earliest Transaction (Month/Day/Year) 01/19/2018							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director X_ Officer (give title below) Other (specify below) Chief Executive Officer					
1660 SOUTH ALBION STREET, SUITE 525															
		(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				
DENVER, CO 80222										Form filed by More than One Reporting Person					
(City	y)	(State)	(Zip)		7	Γable Ι	- Non-Deriv	ative Sec	curities	Acquired,	Disposed	l of, or Ben	eficially Ow	ned	
(Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, any (Month/Day/Yea		f Code (Instr	(4. Securities Acquire (A) or Disposed of ((Instr. 3, 4 and 5)		f (D) Owned Follo Transaction(Ownership Form:	7. Nature of Indirect Beneficial	
					Co	ide V	(A) or Amount (D)		Price	(Instr. 3 and 4)			or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common	Stock		01/19/2018			A	A 1	,934 A	Δ	\$ 2.28 505	5,610			D	
Common	Stock									8,3	34			I	Held in Trust
							contai	ed in th	nis form	n are not	required		nd unless t		1474 (9-02)
							contain form d uired, Disp	ed in th splays a	nis form a curre or Bene	n are not ently valic ficially Ov	required I OMB co		nd unless t		1474 (9-02)
1. Title of Derivative Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, it	4. Transact	5. No of Derivative Section (A) Dispose of (I (Ins	fumber ivative curities cuired or cosed D) tr. 3, 4,	contain form d	splays a psed of, onvertible reisable a Date	nis forr a curre or Bene e securi	n are not ently valic ficially Ov	required i OMB co vned d f	to respondent on trol number of 8. Price of	nd unless t	of 10. Owners: Form of Derivati Security Direct (or Indire	11. Nation of Indir Benefic Owners (Instr. 4
Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, it	4. Transact	5. No of Der. Sect Acq (A) Disp of (I	fumber ivative urities uired or posed D) tr. 3, 4, 5)	contain form d uired, Disp options, co 6. Date Exe Expiration	splays a psed of, onvertible reisable a Date	nis forma a curre or Bene e secur	m are not ently valid ficially Ow ities) 7. Title and Amount of Underlying Securities	required i OMB co vned d f	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction	of 10. Owners: Form of Derivati Security Direct (or Indirects)	11. Nation of Indir Benefic Owners (Instr. 4

Other

Signatures

Mathews Michael

SUITE 525 DENVER, CO 80222

/s/ Michael Mathews	01/22/2018
**Signature of Reporting Person	Date

Reporting Owner Name / Address

1660 SOUTH ALBION STREET

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Director

X

10% Owner

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Relationships

Chief Executive Officer

Officer

- (1) The stock options were exercised prior to their expiration date. The exercise of the stock options were exempt under Rule 16b-6.
- (2) Not applicable.

 $Note: File \ three \ copies \ of \ this \ Form, \ one \ of \ which \ must \ be \ manually \ signed. \ If \ space \ is \ insufficient, \ see \ Instruction \ 6 \ for \ procedure.$

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.	