DEL TORO SILVER CORP.

Form 4

October 30, 2015

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

3235-0287 January 31,

OMB APPROVAL

Expires: 2005

burden hours per

Estimated average response... 0.5

if no longer subject to Section 16. Form 4 or Form 5

obligations

may continue.

See Instruction

Check this box

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * Fagen Patrick		ng Person *	2. Issuer Name and Ticker or Trading Symbol DEL TORO SILVER CORP. [DTOR]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)	
(Last) 320 NORTH ((First) CARSON ST	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 10/26/2015	X Director 10% OwnerX Officer (give title Other (specify below) Chief Financial Officer	
	(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	
CARSON CITY, NV 89710				Form filed by More than One Reporting Person	

(City)	(State)	(Zip) Tabl	le I - Non-l	Derivative	Secur	ities Acq	uired, Disposed o	f, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactic Code (Instr. 8)	4. Securit or(A) or Dis (Instr. 3, 4	sposed	d 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)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Shares							5,492,727	D	
Common Shares							365,000	I	Grant Fagen Custodial Account
Common Shares							705,000	I	Patrick Fagen IRA Account
Common Shares	10/26/2015		P	20,000	A	\$ 0.018	725,000	I	Patrick Fagen IRA

Account

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.

SEC 1474 (9-02)

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	3	te	7. Title and A Underlying S (Instr. 3 and	Securities	8. P Der Sect (Ins
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Options	\$ 0.1					09/12/2012	09/12/2017	Common Shares	200,000	
Stock Options	\$ 0.15					03/12/2013	09/12/2017	Common Shares	200,000	
Stock Options	\$ 0.15					09/12/2013	09/12/2017	Common Shares	200,000	
Stock Options	\$ 0.2					03/12/2014	09/12/2017	Common Shares	150,000	

Reporting Owners

Reporting Owner Name / Address	Relationships						
Toporting of the remove removes	Director	10% Owner	Officer	Other			
Fagen Patrick 320 NORTH CARSON STREET CARSON CITY, NV 89710	X		Chief Financial Officer				

Signatures

/s/ Patrick Fagen	10/30/2015
**Signature of Reporting Person	Date

Reporting Owners 2

Edgar Filing: DEL TORO SILVER CORP. - Form 4

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.