LIGHTBRIDGE Corp Form 4 July 21, 2015

FORM 4

OMB APPROVAL

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

OMB 3235-0287 Number:

Check this box if no longer subject to Section 16.

January 31, Expires: 2005

Form 4 or Form 5 obligations STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Estimated average burden hours per response...

may continue. See Instruction

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

0.5

1(b).

(Print or Type Responses)

| 1. Name and Address of Reporting Person * GRAHAM THOMAS JR | | | 2. Issuer Name and Ticker or Trading Symbol LIGHTBRIDGE Corp [LTBR] | | | | | | 5. Relationship of Reporting Person(s) to Issuer | | | | |
|--|--|----------|--|---|------|---------------------------------------|---|---------------|--|--|---|--|--|
| (Last) | | (Middle) | (Month/D | Date of Earliest Transaction Ionth/Day/Year) | | | | | (Check all applicable) Director 10% Owner Officer (give title Other (specify | | | | |
| 1600 1 Y SC | ONS BLVD, SUľ | 1E 550 | 07/20/2 | 015 | | | | | below) | below) Chairman | (specify | | |
| | 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 Form filed by More than One Reporting | | | | | | |
| MCLEAN, | VA 22102 | | | | | | | | Person | ore than One Rej | porting | | |
| (City) | (State) | (Zip) | Tabl | e I - Non | -De | erivative | Secui | rities Acqu | ired, Disposed of, | , or Beneficiall | y Owned | | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | | n Date, if | 3. Transact Code (Instr. 8) | tion | 4. Securit (A) or Di (Instr. 3, | spose | 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 Stock | 07/20/2015 | | | P | | 7,000 | A | 0.9386 (1) | 97,630 | D | | | |
| Common Stock | | | | | | | | | 20,000 | I | Spouse | | |

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 | 2. Conversion | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if | 4. Transacti | 5. orNumber | 6. Date Exerc Expiration D | | 7. Title Amount | | 8. Price of Derivative | 9. Nu Deriv |
|---------------------|------------------------|--|--------------------------------------|-------------------------------|-----------------|----------------|-------------------------------|--------------------|--|--|------------------------|---|
| Security (Instr. 3) | | or Exercise Price of Derivative Security | (x.151111, 24), 1 641) | any (Month/Day/Year) | Code (Instr. 8) | of | (Month/Day/Year) e s | | Underlying Securities (Instr. 3 and 4) | ying ies | Security (Instr. 5) | Secur Bene Owne Follo Repo Trans (Instr |
| | | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title N | Amount or Number of Shares | | |

Reporting Owners

Relationships Reporting Owner Name / Address

> 10% Owner Officer Other Director

GRAHAM THOMAS JR 1600 TYSONS BLVD **SUITE 550** MCLEAN, VA 22102

Chairman

Signatures

/s/ Thomas 07/21/2015 Graham, Jr.

**Signature of Date Reporting Person

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 reported price represents an average weighted price with a trading range of a high of \$.9388 and a low of \$.9386.

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.

Reporting Owners 2