Edgar Filing: U S GLOBAL INVESTORS INC - Form 4

| U S GLOBA Form 4 May 02, 200 | L INVESTORS 1 | INC | | | | | | | | | |
|---|---|--|---|--|---|----------|---|--|--|-----------|--|
| • | | | | | | | | | OMB AF | PROVAL | |
| FORM 4 UNITED STATES SECURITIES ANI Washington, D. | | | | | | | | | OMB Number: | 3235-0287 | |
| Check thi if no long subject to Section 1 Form 4 o | IENT OF | F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES | | | | | | Expires: January 31, 2005 Estimated average burden hours per response 0.5 | | | |
| Form 5 obligation may cont <i>See</i> Instru 1(b). | ns Section 17(a | a) of the P | ublic Ut | | ling Con | npany | Act of | e Act of 1934, 71935 or Sectior 0 | | | |
| (Print or Type F | Responses) | | | | | | | | | | |
| 1. Name and Address of Reporting Person <u>*</u> LYDON THOMAS F JR | | | 2. Issuer Name and Ticker or Trading Symbol U S GLOBAL INVESTORS INC [GROW] | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| (Last) | (First) (N | (| ddle) 3. Date of Earliest Transaction (Month/Day/Year) 05/01/2008 | | | | X Director Officer (give t below) | | Owner r (specify | | |
| (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 Form filed by More than One Reporting Person | | | |
| (City) | (State) | (Zip) | Table | e I - Non-D | erivative | Secur | ities Acq | uired, Disposed of, | , or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemo Execution any (Month/Da | Date, if | 3. Transactio Code (Instr. 8) | 4. Securit on(A) or Di (Instr. 3, | spose | d of (D) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | |
| Class A Common Stock | 05/01/2008 | 05/01/20 | 008 | Code V J <u>(1)</u> | Amount | (D) A | Price \$ 13.75 | (Instr. 3 and 4) 1,000 | D | | |

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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

Edgar Filing: U S GLOBAL INVESTORS INC - Form 4

| 1. Title of | 2. | 3. Transaction Date | 3A. Deemed | 4. | 5. | 6. Date Exerc | isable and | 7. Titl | le and | 8. Price of |
|-------------|-------------|---------------------|--------------------|-----------|--------------|---------------------|--------------------|---------|--|-------------|
| Derivative | Conversion | (Month/Day/Year) | Execution Date, if | Transac | tionNumber | Expiration Da | ate | Amou | int of | Derivative |
| Security | or Exercise | | any | Code | of | (Month/Day/ | Year) | Under | rlying | Security |
| (Instr. 3) | Price of | | (Month/Day/Year) | (Instr. 8 |) Derivative | e | | Secur | ities | (Instr. 5) |
| | Derivative | | | | Securities | | | (Instr. | 3 and 4) | |
| | Security | | | | Acquired | | | | | |
| | | | | | (A) or | | | | | |
| | | | | | Disposed | | | | | |
| | | | | | of (D) | | | | | |
| | | | | | (Instr. 3, | | | | | |
| | | | | | 4, and 5) | 4, and 5) | | | | |
| | | | | Code V | / (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | |

Reporting Owners

Reporting Owner Name / AddressRelationshipsDirector10% OwnerOfficerOtherLYDON THOMAS F JRXXVV

Signatures

Susan B. McGee, Power of Attorney for Thomas F. Lydon, Jr.

**Signature of 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) Grant of restricted stock from the company to members of the board of directors.

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.

9. Nu Deriv Secu: Bene Own Follo Repo Trans (Instr

05/02/2008

Date