Edgar Filing: U S GLOBAL INVESTORS INC - Form 4

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Form 4 March 15, 2		INC									
FORM	FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB									PROVAL	
	UNITED	STATES					ANGE C	OMMISSION	OMB Number:	3235-0287	
Check this box Washington, D.C. 20549								January 31,			
if no lor		AENT O	F CHAN	IGES IN	BENEF	ICL	AL OWN	NERSHIP OF	Expires:	2005	
0	subject to Section 16. STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES						Estimated a burden hour				
	Form 4 or						response	0.5			
Form 5 obligation	-						•	e Act of 1934,			
may cor	ntinue.			tility Hol	•	-	•	1935 or Sectior	1		
<i>See</i> Inst 1(b).	ruction	50(11)	of the fi	ivestillent	i Compa		ct 01 174	0			
1(0).											
(Print or Type	Responses)										
1 Name and	Address of Reporting	Person *	2 1	er Name an o	J.T.: -1	. T J	•	5 Relationship of	Reporting Pers	on(s) to	
HOLMES			2. Issue Symbol	ar ivanie and	u Ticker o	r 1rau	mg	5. Relationship of Reporting Person(s) to Issuer			
			U S GLOBAL INVESTORS INC				INC	(Check all applicable)			
			[GROV	V]				(Check	x all applicable)	
(Last)	(First) (Middle)	3. Date o	f Earliest T	ransaction			_X_ Director	X10%		
			(Month/Day/Year)					_X_ Officer (give below)	below)	r (specify	
7900 CALLAGHAN ROAD			03/14/2017					CEO			
	(Street)			endment, D	-	al		6. Individual or Jo	int/Group Filin	g(Check	
			Filed(Mo	nth/Day/Yea	r)			Applicable Line) _X_ Form filed by O	one Reporting Per	rson	
SAN ANTONIO, TX 78229								Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Tab	lo I Non I	Domination	Com	witing A age		on Donoficial	ler Oremod	
1.Title of	2. Transaction Date	-		3.			-	uired, Disposed of	6.	-	
Security	(Month/Day/Year)			5. Transactio	4. Securi on(A) or Di			5. Amount of Securities	0. Ownership	7. Nature of Indirect	
(Instr. 3)	-	any		Code	(Instr. 3,	4 and	5)	Beneficially	Form: Direct		
		(Month/L	Day/Year)	(Instr. 8)				Owned Following	(D) or Indirect (I)	Ownership (Instr. 4)	
						(A)		Reported	(Instr. 4)		
						or		Transaction(s) (Instr. 3 and 4)			
Class A				Code V	Amount	(D)	Price	(
common	03/14/2017	03/14/2	017	P (1)	362	А	\$	222,642	D		
stock		00/1//2	017		002		1.4844	,0	2		
Class A											
common								32,862	Ι	IRA	
stock											
Class A											
common								221,587.77	Ι	401(k)	
stock											

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)

1.	Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Tit	le and	8. Price of	9. Nu
D	erivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration D	ate	Amou	int of	Derivative	Deriv
Se	ecurity	or Exercise		any	Code	of	(Month/Day/	/Year)	Under	rlying	Security	Secu
(II	nstr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivativ	e		Secur	ities	(Instr. 5)	Bene
		Derivative				Securities	3		(Instr.	. 3 and 4)		Owne
		Security				Acquired						Follo
						(A) or						Repo
						Disposed						Trans
						of (D)						(Instr
						(Instr. 3,						
						4, and 5)						
										Amount		
							Date	Expiration		or		
						Exercisable		* ·	Title	Number		
							Exclosuble	Duit		of		
					Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
HOLMES FRANK E 7900 CALLAGHAN ROAD SAN ANTONIO, TX 78229	Х	Х	CEO				
Signatures							

Sussan B. McGee	03/15/2017
<u>**</u> Signature of Reporting Person	Date

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) Purchase made pursuant to 10b5-1 stock purchase plan (1) Not an Option (2) Not an Option

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.