

NEW JERSEY MINING CO
Form 4
February 11, 2015

FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

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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, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *
Swallow John

2. Issuer Name and Ticker or Trading Symbol
NEW JERSEY MINING CO
[NJMC]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)

3. Date of Earliest Transaction (Month/Day/Year)
04/30/2014

Director 10% Owner
 Officer (give title below) Other (specify below)

201 N. THIRD STREET

(Street)

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)
 Form filed by One Reporting Person
 Form filed by More than One Reporting Person

COEUR D'ALENE, ID 83814

(City) (State) (Zip)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	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 Ownership (Instr. 4)
				(A) or (D)	Code V Amount (D) Price		

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	2. Conversion or Exercise	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any	4. Transaction Code	5. Number of Derivative Securities	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)
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(Instr. 3)	Price of Derivative Security	(Month/Day/Year)	(Instr. 8)	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date Exercisable	Expiration Date	Title	Amount Number Shares
				Code	V				
Director's Stock Option (Right to Buy) ⁽¹⁾	\$ 0.1	04/30/2014	A	V	250,000	04/30/2014	04/30/2017	Common stock	250,000
Director's Stock Option (Right to Buy) ⁽¹⁾	\$ 0.1	04/30/2014	A	V	250,000	04/30/2015	04/30/2018	Common stock	250,000
Director's Stock Option (Right to Buy) ⁽¹⁾	\$ 0.1	04/30/2014	A	V	250,000	04/30/2016	04/30/2019	Common stock	250,000
Director's Stock Option (Right to Buy) ⁽²⁾	\$ 0.15	12/31/2014	A	V	250,000	12/31/2014	12/31/2019	Common stock	250,000
Director's Stock Option (Right to Buy) ⁽²⁾	\$ 0.15	12/31/2014	A	V	250,000	12/31/2015	12/31/2020	Common stock	250,000

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Swallow John 201 N. THIRD STREET COEUR D'ALENE, ID 83814	X	X		

Signatures

/s/ John Swallow 02/10/2015

**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) The options granted on April 30, 2014 vest as follows: 250,000 on 4/30/2014, 250,000 on 4/30/2015, and 250,000 on 4/30/2016.
- (2) The number of options granted on December 31, 2014 vest as follows: 250,000 on 12/31/2014, and 250,000 on 12/31/2015.
- (3) The number of Derivative Securities beneficially owned includes 2,300,000 purchase warrants acquired in the Company's private placements.

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.