<b>FORM</b>	4
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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).

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

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02)

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Third of Type Responses)												
1. Name and Address of LOUGEE ANTHON	2. Issuer Name <b>and</b> Ticker or Trading Symbol U.S. GOLD CORP. [USAU]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) C/O U.S. GOLD CO IDAHO STREET, S		/	3. Date of Earliest Transaction (Month/Day/Year) 08/23/2017						X Officer (give title below) Other (specify below) Chief Financial Officer			
(Street) ELKO, NV 89801			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 I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	Execution Date, if	Code (Instr. 8)		(A) or Disposed of (D)		of	Beneficially Owned Following Reported Transaction(s) Form:		Beneficial Ownership	
Common Stock		08/23/2017		Code	-	Amount 11,000	( )	Price	20.831	(I) (Instr. 4)	(IIISU: 4)	
Common Block		00/20/2017				11,000			-0,001	-		

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

( <i>e.g.</i> , puts, calls, warrants, options, convertible securities)															
1. Title of	2.	3. Transaction	3A. Deemed	4.	5	5. Nui	nber	6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transactio	on o	of		and Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	Γ	Deriva	ative	(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	S	Securi	ities			Secur	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				A	Acqui	red			(Instr	. 3 and		Owned	Security:	(Instr. 4)
	Security				(4	A) or				4)			Following	Direct (D)	
					Γ	Dispo	sed						Reported	or Indirect	
					0	of (D)							Transaction(s)	(I)	
					(1	Instr.	3,						(Instr. 4)	(Instr. 4)	
					4	l, and	5)								
											Amount				
								D.	<b>.</b>		or				
								Date	Expiration Date	Title	Number				
								Exercisable	Date		of				
				Code V	V (	(A)	(D)				Shares				

## **Reporting Owners**

Den effer Orner News (Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
LOUGEE ANTHONY C/O U.S. GOLD CORPORATION 1910 E. IDAHO STREET, SUITE 102-BOX 604 ELKO, NV 89801			Chief Financial Officer					

## Signatures

/s/ Anthony Lougee	08/25/2017
**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) Issued pursuant to the Issuer's 2017 Equity Incentive Plan in consideration for the Reporting Person's role as an officer of the Issuer and in accordance with Reporting Person's employment agreement and for the period February 1, 2017 through July 31, 2017 inclusive.

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.