FORM 4	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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SEC 1474 (9-02)

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

(Print of Type Responses)											
1. Name and Address of Reporting Person [*] KAPLAN ANDREW J			2. Issuer Name and Ticker or Trading Symbol U.S. GOLD CORP. [USAU]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner		
(Last) (Fi C/O U.S. GOLD CORI IDAHO STREET, SUI		·	3. Date of Earliest Transaction (Month/Day/Year) 02/03/2020				Officer (give title below)	Other (specify b	pelow)		
(St 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) (St	itate)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								
1.Title of Security (Instr. 3)		Date (Month/Day/Year)	Execution Date, if	Code (Instr. 8)	tion	(A) or Disposed of (D)		of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D)	Beneficial Ownership
				Code	V	Amount	(A) or (D)	Price		or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock		02/03/2020		А		4,500 (<u>1)</u>	А	\$ 0	129,000	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 -	Der	ivative	e Securi	ities Acq	uired, Di	isposed o	f, or 🛛	Beneficially	Owned
	100		a alla r		antiona	aamarant	hla a	a a verti a a)	

	(e.g., puts, cans, warrants, options, convertible securities)														
1. Title of	2.	3. Transaction	3A. Deemed	4.	5.			6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transactio	n N	lumbo	er	and Expirati	on Date	Amou	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	0	f		(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	D) eriva	tive			Secur	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					ecuri				(Instr	. 3 and		Owned	Security:	(Instr. 4)
	Security				A	cquii	red			4)			Following	Direct (D)	
					· ·	A) or							1	or Indirect	
					D	Dispos	sed						Transaction(s)	(I)	
						f (D)							(Instr. 4)	(Instr. 4)	
					· ·	Instr.									
					4	, and	5)								
											Amount				
								Date	Expiration		or				
								Exercisable	Expiration Date	Title	Number				
								LACICISADIC	Date		of				
				Code V	/ (A)	(D)				Shares				

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
KAPLAN ANDREW J C/O U.S. GOLD CORPORATION 1910 E. IDAHO STREET, SUITE 102-BOX 604 ELKO, NV 89801	Х					

Signatures

/s/ Andrew J. Kaplan	02/05/2020	
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) Represents restricted shares of common stock awarded to the reporting person on February 3, 2020 pursuant to the U.S. Gold Corp. 2020 Stock Incentive Plan. Such shares vested immediately upon grant.

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.