

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

OMB APPROVAL				
OMB Number:	3235-0104			
Estimated average	burden			
nours per response	e 0.5			

INITIAL STATEMENT OF 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 or Type Responses)									
1. Name and Address of Reporting Person* MAGRAW DANIEL B	Statemen	2. Date of Event Requiring Statement (Month/Day/Year) 10/23/2006		3. Issuer Name and Ticker or Trading Symbol Thorium Power, Ltd [THPW.OB]					
(Last) (First) (Middle) 8564 HORSESHOE LANE	10/23/2			4. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_Director Officer (give title below) Other (specify below)				5. If Amendment, Date Original Filed(Month/Day/Year)	
POTOMAC, MD 20854							Applicable Lin _X_ Form filed	6. Individual or Joint/Group Filing(Check Applicable Line) X_Form filed by One Reporting PersonForm filed by More than One Reporting Person	
(City) (State) (Zip)		Table I - Non-Derivative Securities Beneficially Owned							
1. Title of Security (Instr. 4)	·	Beneficially Owned F (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	(Ins	Nature of Indirect Beneficial Ownership str. 5)			
Common Stock		270,9	963		D				
Common Stock 2,563		3		I	Sor	n			
Reminder: Report on a separate line for each cl Persons who res unless the form of	pond to the d lisplays a cu	collection of in	nformation of DMB control	contained in t I number.					
1. Title of Derivative Security (Instr. 4)		Date Exercisable and spiration Date 3. Title and Securities		Amount of nderlying	4. Conversion or Exercise Price of Derivative		5. Ownership Form of Derivative Security:	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
	Date Exercisable	Expiration Date	Title	Amount or Number of Sha	Security		Direct (D) or Indirect (I) (Instr. 5)		
Compensatory Stock Option	10/06/2006	01/31/2007	Common Stock	640,695	\$ 0.39		D		
Reporting Owners									

Depositing Owner Name /	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
MAGRAW DANIEL B 8564 HORSESHOE LANE POTOMAC, MD 20854	X				

Signatures

/s/ Daniel B. Magraw	11/02/2006
**Signature of Reporting Person	Date

Explanation of Responses:

- If the form is filed by more than one reporting person, see Instruction 5(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C.

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.