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 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	S)															
1. Name and Address of Reporting Person *- ALESSI VICTOR E				2. Issuer Name and Ticker or Trading Symbol LIGHTBRIDGE Corp [LTBR]							mbol		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last) (First) (Middle) C/O LIGHTBRIDGE CORPORATION, 11710 PLAZA AMERICA DRIVE, SUITE 2000				3. Date of Earliest Transaction (Month/Day/Year) 11/18-05:00/2021							//Year)	Offic	er (give title bele	ow)	Other (specify	below)	
(Street) RESTON, VA 20190				4. If Amendment, Date Original Filed(Month/Day/Year)						_X_ Form f	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)			Tab	le I -	Non-	-Deri	ivative S	Securitie	es Ac	quired, Disp	osed of, or	Beneficially	Owned	
(Instr. 3) Date		2. Transaction Date (Month/Day/Year)	Execution Date, if Code		. 8)	4. Securities Acc (A) or Disposed (Instr. 3, 4 and 5) (A) or V Amount (D)		l of (1 5)	(D) Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)					
Common	Stock		11/18- 05:00/2021				A ⁽¹	I)		3,274	A	\$ C (1)	8,850			D	
Kemmuer.	Report on a s	reparate file fo		Deriva	ative Secu	ıritie	s Acq	F C t	Personta conta the fo	ons whained in	no responding this formal splays and the for	orm a cui enefic	to the colle are not req rently valid	uired to res d OMB con	spond unle	ess	1474 (9-02)
	ı	T .			uts, calls									1	1		
Security	2. Conversion or Exercise Price of Derivative Security		Year) Execution Da	4. Transaction Code Year) (Instr. 8)		on No D S S A (A D D O (I	Number a		6. Date Exercisable and Expiration Date (Month/Day/Year)		A U S	,	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Owners Form o Derivat Security Direct (or Indir	Ownersh (Instr. 4) D) ect	
					Code	V (A) (Date Exerc		Expiration Date	on T	Amount or Number of Shares				

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
ALESSI VICTOR E C/O LIGHTBRIDGE CORPORATION 11710 PLAZA AMERICA DRIVE, SUITE 2000 RESTON, VA 20190	X						

Signatures

/s/ Victor Alessi	11/22-05:00/2021
**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 an equity grant, which 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.