Edgar Filing: Labor Smart, Inc. - Form 4

Labor Sma Form 4	rt, Inc.										
December	07, 2015										
FORM 4 UNITED STATES SECURITIES AND I Washington, D.C.									OMB API OMB Number:	PROVAL 3235-0287	
if no lo subject Section Form 4 Form 5 obligati may co	to 16. or Filed pu tons Section 17	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								January 31, 2005 erage per 0.5	
(Print or Type	e Responses)										
Thompson Kimberly Symbol			bol	and it will and it will be it will be				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Month.								_ Director Officer (give ti	ector 10% Owner		
				Month/Day/Year) A				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
CASTRO	VALLEY, CA 94	-552						Form filed by Mo			
(City)	(State)	(Zip)	Table I - Non	-Deriv	ative Sec	urities	Acquired	, Disposed of, o	or Beneficially	Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	ransaction Date 2A. Deemed nth/Day/Year) Execution Date, if any (Month/Day/Year)		3. 4. Securities Acquired (A) TransactiorDisposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or Code V Amount (D) Pr				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common	12/04/2015		Р	10,0	00,000	A	\$ 0.0004	80,198,300	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 - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Addres	SS	Relationships						
1	Director	10% Owner	Officer	Other				
Thompson Kimberly 37789 PALOMARES RD. CASTRO VALLEY, CA 945.	52		COO					
Signatures								
/s/ Kimberly Thompson	12/07/2015							

**Signature of Reporting Person

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

Date

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

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.