Dyck Arnold Jacob Form 4 March 03, 2010

## FORM 4

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

**OMB APPROVAL** 

**OMB** 3235-0287 Number:

January 31, Expires: 2005 Estimated average

Other (specify

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Check this box if no longer subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

Form 5 obligations may continue. See Instruction

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

1(b).

(Last)

(Print or Type Responses)

1. Name and Address of Reporting Person \* Dyck Arnold Jacob

(First)

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to

Issuer

URANERZ ENERGY CORP. [URZ]

(Middle)

3. Date of Earliest Transaction (Month/Day/Year)

(Check all applicable) X\_ Director 10% Owner

504-230 SASKATCHEWAN CRESCENT EAST

> 4. If Amendment, Date Original (Street)

03/03/2010

6. Individual or Joint/Group Filing(Check

Officer (give title

Filed(Month/Day/Year)

Applicable Line) \_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

below)

SASKATOON, A9 S7N0K6

(City) (State) (Zip)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1.Title of Security (Instr. 3)

2. Transaction Date 2A. Deemed (Month/Day/Year)

Execution Date, if (Month/Day/Year)

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5)

Code V Amount (D) Price

(A)

or

5. Amount of Securities Beneficially Owned Following Reported

Transaction(s)

(Instr. 3 and 4)

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial (I) Ownership (Instr. 4) (Instr. 4)

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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)

1. Title of Derivative Conversion Security or Exercise

3. Transaction Date 3A. Deemed (Month/Day/Year) Execution Date, if

any

4. 5. Number of TransactionDerivative Securities Code Acquired (A) or

6. Date Exercisable and **Expiration Date** (Month/Day/Year)

7. Title and An Underlying Sec (Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8)  Code V	Disposed of (Instr. 3, 4, a		Date Exercisable	Expiration Date	Title	A
										S
Common Share Options	\$ 1.96	03/03/2010		J		150,000	05/23/2006	05/23/2011	Common Shares	
Common share options	\$ 3.2	03/03/2010		J		45,000	01/26/2007	01/26/2012	Common shares	
Common share options	\$ 2.64	03/03/2010		J		35,000	01/07/2008	01/07/2013	Common Shares	
Common Share options	\$ 0.65	03/03/2010		J		37,500	01/05/2009	01/05/2014	Common shres	
Common share options	\$ 0.65	03/03/2010		J	37,500		01/05/2009	01/05/2019	Common shares	
Common share options	\$ 2.64	03/03/2010		J	35,000		01/07/2008	01/07/2018	Common shares	
Common share options	\$ 3.2	03/03/2010		J	45,000		01/26/2007	01/26/2017	Common shares	
Common share options	\$ 1.96	03/03/2010		J	150,000		05/23/2006	05/23/2016	Common shares	

# **Reporting Owners**

Reporting Owner Name / Address	Relationships				
	Director	10% Owner	Officer	Other	

Dyck Arnold Jacob 504-230 SASKATCHEWAN CRESCENT EAST X SASKATOON, A9 S7N0K6

# **Signatures**

Arnold Dyck	03/03/2010		
**Signature of Reporting Person	Date		

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## **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).

#### **Remarks:**

The expiry period of Mr. Dyck's outstanding options was extended to a period of ten years from the date of the original grant of 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.