FORM 4

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

OMB APPROVAL					
MB Number:	3235-0287				
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ours per response.	0.5				

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 Typ	e Responses)	_												
Name and Address of Reporting Person * FRANKLIN JAMES M.			2. Issuer Name and Ticker or Trading Symbol UR-ENERGY INC [URG]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
10758 WEST CENTENNIAL ROAD, SUITE 200				3. Date of Earliest Transaction (Month/Day/Year) 12/11/2015								e title below)		r (specify below)
(Street) LITTLETON, CO 80127			4. If Amendment, Date Original Filed(Month/Day/Year)						_X_	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) (State) (Zip)				Table I - Non-Derivative Securities Acqui							ired. Disposed of, or Beneficially Owned				
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year			2A. Deemed Execution Date, if		3. To Coo (Instance)	3. Transaction Code (Instr. 8)		Securities Acquired 5.) or Disposed of (D) Or Str. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			Ownership of orm: Direct (D)	. Nature f Indirect Beneficial Dwnership Instr. 4)	
Reminder: R	Report on a se	eparate line for eac		Derivative	Sec	urities A	cqui	Persons containe form dis	who respond d in this form plays a curre ed of, or Benef	n are not ently vali ficially O	t required d OMB co	to respon	d unless th		474 (9-02)
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, it	4. 5 Transaction of Code Code Code Code Code Code Code Code		5. Number		options, convertible securi 6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Form of Derivativ Security: Direct (D or Indirect	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Common share options (right to buy)	\$ 0.5882 (1)	12/11/2015		A		56,470		(2)	12/11/2020	Commo shares	ⁿ 56,470	\$ 0	411,255	D	
Restricted share units (exchange for common stock)	(3)	12/11/2015		A		14,118		<u>(4)</u>	(4)	Commo	n 14,118	\$ 0	37,894	D	
D			1												

Reporting Owners

Donardina Comerci Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
FRANKLIN JAMES M.								
10758 WEST CENTENNIAL ROAD, SUITE 200	X							
LITTLETON, CO 80127								

Signatures

/s/ L. Charles Laursen, L Charles Laursen pursuant to Power of Attorney		12/11/2015
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) The options were priced at \$0.80 Canadian dollars. This is the U.S. dollar equivalent of the purchase price pursuant to the exchange rate as of the transaction date (Cdn\$ 1.00 =

 $US\$0.7353) \ as \ reported \ by \ Bank \ of \ Canada \ on \ its \ website, \ www.bank of canada.ca.$

- (2) Options vest from this grant and become exercisable as follows: 5,647 on December 11, 2015; 12,423 on April 26, 2016; 12,424 on September 10, 2016; 12,423 on January 25, 2017 and 13,553 on June 10, 2017.
- (3) Each unit is redeemable upon vesting for one common share.
- (4) Units vest and become redeemable on December 11, 2017.

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.