Edgar Filing: CAPITAL GOLD CORP - Form 4

CAPITAL GOLD CORP

Form 4											
January 25, 20											
FORM	RITIES AND EXCHANGE COMMISSION Ishington, D.C. 20549					OMB AF OMB Number:	PROVAL 3235-0287				
Check this if no longe subject to Section 16 Form 4 or Form 5 obligation may contin <i>See</i> Instruct 1(b).	er STATE 5. Filed pu s 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							Expires: Estimated a burden hour response	-	
(Print or Type Ro	esponses)										
RAB SPECIAL SITUATIONS Symbol				r Name and Ticker or Trading AL GOLD CORP [CGLD]				5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First)	(Middle)		f Earliest Tr	-		1	(Checl	k all applicable)	
P.O. BOX 90 HOUSE MA)8 GT, WALK IN STREET	ER	(Month/E 01/25/2	Day/Year)				Director Officer (give below)	title Othe below)	Owner r (specify	
(Street) 4. If Ame			endment, Date Original nth/Day/Year)				6. Individual or Joint/Group Filing(Check				
Filed(Mon GEORGE TOWN, E9 0000							Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative S	ecuriti	ies Acau	iired, Disposed of	or Beneficial	v Owned	
	2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if any (Month/Day/Year)			3. 4. Securities Acquired Transactior(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or Code V Amount (D) Price				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect	
Common Stock	01/25/2007			S	115,000	D	\$ 0.38	15,443,700	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. Transacti Code (Instr. 8)	5. 6. Date Exercisabl orNumber Expiration Date of (Month/Day/Year) 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 Owna Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address		Relationships						
			10% Owner	Officer	Other			
RAB SPECIAL SITUATIONS (MASTER) FUND LTD								
P.O. BOX 908 GT WALKER HOUSE MAIN STREET GEORGE TOWN, E9 0000			Х					
Signatures								
/s/ Benjamin	01/25/2007							

**Signature of Reporting Person

Sig

Hill

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).

Remarks:

Authorized signatory for RAB Capital PLC for and on behalf of RAB Special Situations (Master) Fund Limited.

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.