Rose Paul David Form 3 June 21, 2010

FORM 3

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

OMB APPROVAL

OMB Number:

3235-0104

Expires:

response...

January 31, 2005

0.5

Estimated average burden hours per

INITIAL STATEMENT OF 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

(Print or Type Responses)

| 1. Name and Address of Reporting Person * Rose Paul David | | | 2. Date of Event Requ Statement (Month/Day/Year) | - 2.1554011.41 | 3. Issuer Name and Ticker or Trading Symbol GEOVIC MINING CORP. [TSX-GMC] | | | | |
|--|----------|----------|--|--|---|--|--|--|--|
| (Last) | (First) | (Middle) | 06/11/2010 | 4. Relationsh Person(s) to | nip of Reporting Issuer | 5. If Amendment, Date Original Filed(Month/Day/Year) | | | |
| 14465 NW | BELLE PL | _ | | (CI) | | | | | |
| | (Street) | | | (Cneci | k all applicable | 6. Individual or Joint/Group | | | |
| BEAVERT | ON, ORÆ | RÂ 97006 | | _X_ Directo Officer (give title belo | Othe | 5 | | | |
| (City) | (State) | (Zip) | Table | I - Non-Deriva | tive Securit | ies Beneficially Owned | | | |
| 1.Title of Sect (Instr. 4) | ırity | | | ount of Securities cially Owned 4) | 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | 4. Nature of Indirect Beneficial Ownership (Instr. 5) | | | |
| Common S | tock | | 6,878 | ,197 <u>(1)</u> | D | Â | | | |
| Common S | tock | | 1,968 | ,666 | I | Interest in 401(k) Plan of Oregon Anesthesiology Group | | | |
| Common S | tock | | 278,6 | 40 (2) | D | Â | | | |
| Common S | tock | | 243,90 | 00 | I | Trustee of Trusts of which reporting person is not a beneficia | | | |
| Reminder: Repowned directly | _ | | ach class of securities be | eneficially | SEC 1473 (7-02 | 2) | | | |

information contained in this form are not required to respond unless the form displays a

currently valid OMB control number.

Persons who respond to the collection of

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

Edgar Filing: Rose Paul David - Form 3

| 1. Title of Derivative Security (Instr. 4) | 2. Date Exercisab Expiration Date (Month/Day/Year) Date Exercisable | | 3. Title and A Securities Un Derivative Se (Instr. 4) | derlying | 4. Conversion or Exercise Price of Derivative Security | 5. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 5) | 6. Nature of Indirect Beneficial Ownership (Instr. 5) |
|--|--|-----|--|----------|---|---|--|
| Options to purchase | 06/11/2010(3) | (3) | Common | 200,000 | \$ <u>(4)</u> | D | Â |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|---|---------------|-----------|---------|-------|--|--|--|
| 1 8 | Director | 10% Owner | Officer | Other | | | |
| Rose Paul David 14465 NW BELLE PL BEAVERTON, OR 97006 | ÂX | Â | Â | Â | | | |

Signatures

/s/ Shelia I. Short for Paul D. Rose 06/21/2010

**Signature of Reporting Person Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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) Includes 290,472 shares held in IRA of spouse and 363,600 shares held by spouse, beneficial ownership of which is disclaimed by reporting person.
- (2) Trustee of Trusts of which 2 minor children are beneficiaries. Beneficiaries are non-emancipated children of reporting person.
- (3) 40% of the options are exercisable on date of grant, 30% are exercisable on each of first two anniversaries of date of grant. Term of options is 10 years from grant date.
- (4) Exercise price is Cdn \$0.60.

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.

Reporting Owners 2