FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	VAL							
OMB Number:	3235-0287							
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

l	d Address of INNESS		2. Issuer Name and Ticker or Trading Symbol GOLD RESERVE INC [GRZ]								Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner								
WICGO	IIIII	RODLINI 11													Direc				
(Last)	(Fir	3 D	Date of Earliest Transaction (Month/Day/Year)								X	Offic belov	er (give title w)	Other below	(specify)				
(Last)		04/27/2010										V P Finan	ce and CFO						
C/O GOI	LD RESERV	04/	04/2//2010																
926 W. SPRAGUE AVENUE, SUITE 200																			
525 51141GOL 117 LITOL, 5511L 200							4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable				
(Ctt)						4. II / incliditions, bate of original Filed (Month bay/ real)								Line)					
(Street)													X Form filed by One Reporting Person				son		
SPOKANE WA 99201													Form filed by More than One Reporting						
					-									Person					
(City)	(St	ate) (Zip)																
		Tabl	- I N	an Davis	4 i	C	!4! -	- ^ -		4 D:		4 au D			<u> </u>	- al			
		Tabi	e i - N	on-Deriv	ative	Seci	uritie	S AC	quire	a, Di	sposed o	T, or B	enetic	ally	Jwne	ea			
1. Title of S	ecurity (Inst	r. 3)		2. Transac	tion									5. Amount of			6. Ownership	7. Nature	
				Date (Month/Da	u/Voor)	Execution Date,			Transaction Disposed Of (D) (Instr. 3, 4 an			tr. 3, 4 and			ities icially	Form: Direct (D) or Indirect	of Indirect Beneficial		
(Month/Day/Y					y/ I cai j				Code (Instr. 8)				Owned		d Following (I)	(I) (Instr. 4)	Ownership		
						· · · ·				1 1,			(A) or Price		Reported Transaction(s)		,	(Instr. 4)	
									Code		Amount	(A) (I	Price			3 and 4)			
Class A C	2010	10			S ⁽¹⁾		10,000	D	\$1.12	. <mark>85</mark> ⁽²⁾ 1		98,132	D						
				<u> </u>													<u> </u>		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
				(e.g., p	uts, c	alls,	warra	ants,	optio	ons, o	convertib	le sec	urities)					
1. Title of Derivative	2. Conversion or Exercise Price of Derivative	3. Transaction Date	3A. Dee	emed ion Date,	4. Transa	ction	5. Number of		6. Date Exercisable and Expiration Date		7. Title and Amount of		8. Price of Derivative Security (Instr. 5)		9. Number o derivative	Ownership	11. Nature of Indirect Beneficial Ownership		
Security		(Month/Day/Year)	if any	/Day/Year)		Code (Instr. 8)		r. Derivative Securities Acquired		(Month/Day/Year) Securities Underlying Derivative						Securities Beneficially		Form:	
(Instr. 3)			(Month	iDayi Year)	8)											Owned	Direct (D) or Indirect	(Instr. 4)	
	Security					(A) or		Security (Instr.			y (Instr. 3	3		Following	(I) (Instr. 4)	` ′			
					of (D) (Instr. 3, 4			and 4)						Reported Transaction	(s)				
														(Instr. 4)	``				
				a		and 5)													
													Amount						
													or Number						
						1 1		Date		Expiration		of							
					Code	V	(A)	(D)	Exerci	sable	Date	Title	Shares						

Explanation of Responses:

- 1. Automatic sale pursuant to a 10b5-1 trading plan.
- 2. The sales prices ranged from \$1.11 to \$1.18. The filer hereby agrees to provide, upon request, full information regarding the number of shares sold at each separate price.

Mary E. Smith, Attorney in Fact for Robert A. McGuinness

04/27/2010

Date

** Signature of Reporting Person

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

- * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.