MIRENCO INC

Form 4

December 20, 2004

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

**OMB APPROVAL** 

**OMB** 3235-0287 Number:

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Check this box if no longer

subject to Section 16. Form 4 or 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

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

(Print or Type Responses)

1(b).

1. Name and Address of Reporting Person \* **FOSSEEN DWAYNE** 

2. Issuer Name and Ticker or Trading Symbol

MIRENCO INC [MREO.OB]

5. Relationship of Reporting Person(s) to

Issuer

(Last)

(First)

(Street)

(Ctota)

(Middle)

3. Date of Earliest Transaction

Director 10% Owner

(Check all applicable)

PO BOX 343, 206 MAY ST

(Month/Day/Year) 12/16/2004

Other (specify X\_ Officer (give title below) Chief Executive Officer

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

Person

RADCLIFFE, IA 50230

(City)	(State) (2	Table	I - Non-Do	erivative Securitie	s Acquired, Dispose	ed of, or Beneficia	ally Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities on Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock			Code V	or Amount (D) P	(Instr. 3 and 4) 8,018,565	D		
Common Stock					1,200	I	Daughter	
Common Stock					2,000	I	Spouse	

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

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#### number.

## Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount o Number o Shares
Warrant to Purchase Stock	\$ 0.2	12/16/2004		A	12,000	12/16/2004	06/30/2006	Common Stock	12,000
Stock Options	\$ 0.375					12/03/2004	01/31/2014	Common Stock	1,000
Warrants for Purchase of Stock	\$ 0.25					08/04/2004	08/08/1988	Common Stock	1,000,0
Stock Options (Right to Buy)	\$ 0.375					08/27/2004	01/31/2014	Common Stock	1,000
Stock Options (right to Buy)	\$ 0.5					06/28/2004	01/31/2014	Common Stock	1,000
Stock Options (Right to Buy)	\$ 0.6325					04/14/2004	01/31/2014	Common Stock	250
Stock Options (Right to Buy)	\$ 0.29					12/28/1998	12/28/2008	Common Stock	36,000
Stock Options (Right to Buy)	\$ 0.375	12/16/2004		A	1,000	12/16/2004	01/31/2014	Common Stock	1,000

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## **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

FOSSEEN DWAYNE

PO BOX 343 206 MAY ST

Chief Executive Officer

RADCLIFFE, IA 50230

## **Signatures**

/s/Dwayne 12/20/2004 Fosseen

\*\*Signature of Date

Reporting Person

## **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:**

Warrants have no expiration dates

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.

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