FORM 4	4
--------	---

Check this box if no
longer subject to
Section 16. Form 4 or
Form 5 obligations
may continue. See
Instruction 1(b).

(D...;

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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

### 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

1. Name and Address of Reporting Person <sup>2</sup> BUNKA CHRISTOPHER	2. Issuer Name <b>and</b> Ticker or Trading Symbol LEXARIA CORP. [LXRP]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner			
(Last) (First) 1924 BIRKDALE AVE		3. Date of Earliest Transaction (Month/Day/Year) 01/20/2010					X_Officer (give title below) Other (specify below) President			
(Street) KELOWNA, A1 V1P1R7		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				
(City) (State)	(Zip)		Table I - N	lon-D	erivative	Securit	ies Acqu	ired, Disposed of, or Beneficially Ow	ned	
I. Title of Security 2. Transaction Instr. 3) Date (Month/Day/Yee			(Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		of (D)	Owned Following Reported Transaction(s)	Ownership Form:	Beneficial
		(Month/Day/Year)	Code	v	Amount	(A) or (D)	Price	(Instr. 3 and 4)	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common Shares								4,318,958	I	Private Holding Company
Common Shares								2,406,294	D	
Common Shares	02/13/2015		Р		20,000	А	\$ 0.098	2,426,294	D	
Common Shares	02/13/2015		Р		10,725	А	\$ 0.10	2,437,019	D	
Common Shares	02/13/2015		Р		9,275	А	\$ 0.105	2,446,294	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 SEC 1474 (9-02) 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)																		
Derivative Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Code	5. Number of		ber vative rities tired or osed 0) c. 3,	6. Date Exercisable and Expiration Date (Month/Day/Year) ve ss 1		6. Date Exercisable and Expiration Date (Month/Day/Year)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)	Derivative Securities Beneficially Owned Following Reported Transaction(s)	Derivative Security: Direct (D) or Indirect	Beneficial
				Code	V	(A)		Date Exercisable	Expiration Date	Title	Amount or Number of Shares								
Stock Options	\$ 0.11							12/23/2014	12/23/2019	Common Shares	500,000		500,000	D					
Stock Options	\$ 0.35							07/11/2011	07/11/2016	Common Shares	200,000		700,000	D					
Stock Options	\$ 0.10							06/18/2013	06/18/2018	Common Shares	225,000		925,000	D					
Warrants	\$ 0.25							03/21/2014	09/21/2015	Common Shares	100,067		1,025,067	D					

## **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		

BUNKA CHRISTOPHER				
1924 BIRKDALE AVE	Х	Х	President	
KELOWNA, A1 V1P1R7				

## Signatures

Taven White	02/17/2015
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).

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.