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

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

5. Relationship of Reporting Person(s) to Issuer

longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

1. Name and Address of Reporting Person \*

(Print or Type Responses)

#### 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* BUNKA CHRISTOPHER				2. Issuer Name and 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) (Middle) 1924 BIRKDALE AVE				3. Date of Earliest Transaction (Month/Day/Year) 01/20/2010							X_Officer (give title below)Other (specify below)  CEO							
(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 - Non-Derivative Securities Acqui							ired, Disposed of, or Beneficially Owned							
(Instr. 3) Date		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, it any (Month/Day/Year		(Instr. 8)		(	4. Securities Acqui (A) or Disposed of (Instr. 3, 4 and 5)		of (D)	5. Amount of S Owned Follow Transaction(s) (Instr. 3 and 4)	ing Reported	d (	orm:	7. Natof Ind Of Ind Benef	lirect ficial		
							С	ode	v	Amount	(A) or (D)	Price			(	r Indirect (1) (Instr. 4)	(Instr.	. 4)
Common	Shares												4,318,958		I		Priva Hold Com	
Common	Common Shares											3,248,794		I	)			
Common	Shares		04/13/2015				P	2	25,000	A	\$ 0.10	3,273,794		I	)			
Common Shares 04/1			04/13/2015				P		$\Gamma$ $\Gamma$ $\Gamma$ $\Gamma$ $\Gamma$ $\Gamma$ $\Gamma$ $\Gamma$ $\Gamma$		\$ 0.103	3,283,794	3,794		)			
Common Shares 04/14/20			04/14/2015				P		35,000		\$ 0.102	3,318,794	318,794		)			
Common Shares 04/15/2015			04/15/2015				P		45,000	A	\$ 0.103	3,363,794	363,794		)			
Common Shares 04/15/2015			04/15/2015				P	50,000 A			\$ 0.13 (1)	3,413,794		I	)			
Reminder: R	Report on a so	eparate line for each	class of securities b	eneficial	ly ov	vned o	directl	ľ	Perso	ons who	are not	required	e collection of to respond of number.				C 1474	(9-02)
			Table II -										Owned					
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)	Transaction Number Exp Code of (Mo		6. Dat Expira (Mont	5. Date Exercisable and Expiration Date of Und Month/Day/Year)  7. Title of Und Securit			7. Title of Unde Securiti	lerlying Derivative Security (Instr. 5)		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owner Form of Derivate Securi Direct or Indi	Ownership of Form of Derivative Security: Direct (D) or Indirect			
				Code	V	(A)	(D)	Date Exerci	isable	Expir Date	ration	Title	Amount or Number of Shares					
Stock Options	\$ 0.11							12/23	3/201	4 12/2	3/2019	Comm Share	1 3000 0000		500,000	D		
Stock Options	\$ 0.35							07/11	1/201	1 07/1	1/2016	Comm			700,000	D		
Stock Options	\$ 0.10							06/18	8/201	3 06/1	8/2018	Comm			925,000	D		
Warrants	\$ 0.25							03/21	1/201	4 09/2	1/2015	Comm			1,025,06	7 D		

# **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
BUNKA CHRISTOPHER 1924 BIRKDALE AVE KELOWNA, A1 V1P1R7	X	X	CEO			

# **Signatures**

Taven White	04/15/2015
Signature of Reporting Person	Date

# **Explanation of Responses:**

- $\star$  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).
- (1) Purchase price is in Canadian dollars.

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.