IDAHO GENERAL MINES INC

Form 4 April 10, 2007

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

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OMB APPROVAL

January 31, 2005

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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

1(b).

(Print or Type Responses)

| 1. Name and Address of Reporting Person * HANSEN BRUCE D | | | 2. Issuer Name and Ticker or Trading Symbol IDAHO GENERAL MINES INC [GMO] | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
|--|----------------------|--------------------|--|-------------------------------------|-------------------------|--|--------------|--|--------------|
| (Last) 10 NORTH | (First) POST ST., SU | (Middle) JITE 610 | | f Earliest Trar Day/Year) 007 | nsaction | _X_ Directory Di | icer (give t | ittle 0th below) xecutive Office | er (specify |
| (Street) | | | 4. If Amendment, Date Original | | | 6. Individual or Joint/Group Filing(Check | | | |
| SPOKANE | , WA 99201 | | Filed(Mo | nth/Day/Year) | | | filed by O | ne Reporting Pore than One Re | |
| (City) | (State) | (Zip) | Tab | le I - Non-Dei | rivative Securities Acq | uired, Disp | posed of, | or Beneficia | lly Owned |
| 1.Title of | 2. Transaction I | | | | Securities Acquired | 5. Amou | | 6. | 7. Nature of |
| Security | (Month/Day/Ye | ar) Execution | n Date_if | Transaction | A) or Disposed of (D) | Securitie | 22 | Ownership | Indirect |

Security (Month/Day/Year) Execution Date, if Transaction(A) or Disposed of (D) Securities Ownership Indirect (Instr. 3) Code (Instr. 3, 4 and 5) Beneficially Form: Direct Beneficial Owned Ownership (Month/Day/Year) (Instr. 8) (D) or Following Indirect (I) (Instr. 4) Reported (Instr. 4) (A) Transaction(s) (Instr. 3 and 4) Code V Amount (D) Price Common 04/09/2007 P 100,000 350,000 D 5.35 stock

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 number.

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

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| 1. Title of | 2. | 3. Transaction Date | | 4. | 5. | 6. Date Exerc | | 7. Title a | | 8. Price of | 9. Nu |
|--------------------------------------|---|---------------------|---|----------------------------------|---|---------------------|--------------------|--|-----------|--------------------------------------|---|
| Derivative Security (Instr. 3) | Conversion or Exercise Price of Derivative Security | (Month/Day/Year) | Execution Date, if any (Month/Day/Year) | Transactic Code (Instr. 8) | onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | | Amount Underlyi Securitie (Instr. 3 | ing es | Derivative Security (Instr. 5) | Deriv Secur Bene Own Follo Repo Trans (Instr |
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | or Title N of | umber | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|--------------------------------|---------------|-----------|-------------------------|-------|--|--|--|
| • | Director | 10% Owner | Officer | Other | | | |
| HANSEN BRUCE D | | | | | | | |
| 10 NORTH POST ST. | X | | Chief Executive Officer | | | | |
| SUITE 610 | Λ | | Chief Executive Officer | | | | |
| SPOKANE, WA 99201 | | | | | | | |

Signatures

Gary J. Kocher, Attorney-in-Fact

**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.

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