

# SECURITIES AND EXCHANGE COMMISSION

## FORM 3

Filing Date: **2013-01-10** | Period of Report: **2012-12-31**  
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### ISSUER

#### **LASERLOCK TECHNOLOGIES INC**

CIK: **1104038** | IRS No.: **233023677** | State of Incorporation: **NV** | Fiscal Year End: **1231**  
SIC: **6794** Patent owners & lessors

#### Mailing Address

837 LINDY LANE  
BALA CYNWYD PA 19004

#### Business Address

837 LINDY LANE  
BALA CYNWYD PA 19004  
6109091000

### REPORTING OWNER

#### **VerifyMe, Inc.**

CIK: **1566548** | State of Incorporation: **TX** | Fiscal Year End: **1231**  
Type: **3** | Act: **34** | File No.: **000-31927** | Film No.: **13523519**

#### Mailing Address

NIX, PATTERSON & ROACH,  
L.L.P.  
205 LINDA DRIVE  
DAINGERFIELD TX 75638

#### Business Address

NIX, PATTERSON & ROACH,  
L.L.P.  
205 LINDA DRIVE  
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954-889-3700

# FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL	
OMB Number:	3235-0104
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### INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

<b>1. Name and Address of Reporting Person</b> <u>VerifyMe, Inc.</u> (Last) (First) (Middle) 205 LINDA DRIVE (Street) DAINGERFIELD, TX 75638 (City) (State) (Zip)	<b>2. Date of Event Requiring Statement (Month/Day/Year)</b> 12/31/2012	<b>3. Issuer Name and Ticker or Trading Symbol</b> <u>LASERLOCK TECHNOLOGIES INC [LLTI]</u>	
		<b>4. Relationship of Reporting Person(s) to Issuer (Check all applicable)</b> _____ Director <input checked="" type="checkbox"/> 10% Owner _____ Officer (give title below) _____ Other (specify below)	<b>5. If Amendment, Date Original Filed (Month/Day/Year)</b>  <b>6. Individual or Joint/Group Filing (Check applicable line)</b> <input checked="" type="checkbox"/> Form Filed by One Reporting Person _____ Form Filed by More than One Reporting Person

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	32,222,222	D	

**Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			
Warrant (Right to Buy)	(1)	(1)	Common Stock	5,555,556	\$0.1	D	
Warrant (Right to Buy)	07/01/2013	12/31/2017	Common Stock	48,888,888	\$0.1	D	
Warrant (Right to Buy)	(2)	(2)	Common Stock	33,333,333	\$0.12	D	
Senior Convertible Preferred Stock (Right to Buy)	(3)	(3)	Common Stock	33,333,333	\$0.03	D	

**Explanation of Responses:**

- Exercise date is April 2013; expiration date is October 2015.
- Exercise period for warrants to be determined.
- Senior Convertible Preferred Stock of \$1,000,000 is convertible into Common Stock at holder's election.

## Signatures

/s/ Shephard Lane, Director

\*\* Signature of Reporting Person

01/10/2013

Date

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.**