

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

### OMB APPROVAL OMB Number: 3235-028 Estimated average burden hours per response. 0.5

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

# 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

(Print or Type Responses)													
Name and Address of Reporting Person *  Craven House Capital North America LLC				Issuer Name and Ticker or Trading Symbol     LM FUNDING AMERICA, INC. [LMFA]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner			
(Last) (First) (Middle) 2033 MAIN STREET				3. Date of Earliest Transaction (Month/Day/Year) 05/30/2019						Officer (give title below) Other (specify b	elow)		
(Street) SARASOTA, FL 34237				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)	(City) (State) (Zip) Table I - Non-Derivative Securities Ac					ities Acqu	uired, Disposed of, or Beneficially Owned						
1.Title of Security (Instr. 3)			Transaction Da (Month/Day/Year	r) Execution Date, if any	3. Transaction (Instr. 8)	Code	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		(A) or	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)  6. Ownership Form:			
				(Month/Day/Year)	Code	v	Amount	(A) or (D)	Price		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common Shares			05/30/2019		P		83,954	A	\$ 1.28	723,954	D		
Common Shares			06/04/2019		P		50,355	A	\$ 1.28	774,309	D		
Reminder: Report on a separate	line for each class of securi	ties beneficially	owned directly or	indirectly.		areone	who res	ond to the	collectio	n of information contained in this form are not	SEC	1474 (9-02)	

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

required to respond unless the form displays a currently valid OMB control number.

Title of Derivative	<ol><li>Conversion</li></ol>	<ol><li>Transaction</li></ol>	3A. Deemed	<ol><li>Transaction</li></ol>		<ol><li>Number of Derivat</li></ol>	ive	<ol><li>Date Exerci</li></ol>	sable and	<ol><li>Title and Amou</li></ol>	int of Underlying	<ol><li>Price of</li></ol>	<ol><li>Number of</li></ol>	10.	<ol><li>Nature</li></ol>
Security	or Exercise	Date	Execution Date, if	Code		Securities Acquired (	A) or	Expiration Dat	te	Securities		Derivative	Derivative	Ownership	of Indirect
(Instr. 3)	Price of	(Month/Day/Year)	any	(Instr. 8)		Disposed of (D)		(Month/Day/Y	ear)	(Instr. 3 and 4)		Security	Securities	Form of	Beneficial
	Derivative		(Month/Day/Year)			(Instr. 3, 4, and 5)						(Instr. 5)	Beneficially	Derivative	Ownership
	Security												Owned	Security:	(Instr. 4)
													Following	Direct (D)	
									Expiration	Title	Amount or Number			or Indirect	
								Exercisable	Date		of Shares		Transaction(s)	(I)	
				Code	V	(A)	(D)						(Instr. 4)	(Instr. 4)	
Warrants	\$ 2.4	11/01/2018		P		640,000		11/01/2018	11/01/2023	Common Shares	640,000	\$ 2.4	640,000	D	

# **Reporting Owners**

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Craven House Capital North America LLC 2033 MAIN STREET		X					
SARASOTA, FL 34237							

# **Signatures**

/s/ Mark Pajak	06/06/2019
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).

640,000 units acquired on 11/1/18. Each unit was priced at \$2.40 and consisted on one common share and one warrant. The shares acquired are included in calculations in table 1 above and warrants listed in table 2 above.

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.