# FORM 4

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

OMB APPROVAL						
OMB Number:	3235-0287					
Estimated average burden						
nours per response	e 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

i -	pe Response													41 25			
Name and Address of Reporting Person * Nilson Troy F					2. Issuer Name <b>and</b> Ticker or Trading Symbol BMB MUNAI INC [KAZ]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
533 WES	·	OUTH, #25	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 06/17/2008								er (give title belo		Other (specify	below)	
(Street)					4. If Amendment, Date Original Filed(Month/Day/Year)								ual or Joint/ed by One Repo		g(Check Applic	able Line)	
BOUNTIFUL, UT 84010												Form filed by More than One Reporting Person					
(City	")	(State)	(Zip)			Tab	ole I -	Non-	Deri	vative S	ecurities	Acqu	ired, Disp	osed of, or l	Beneficially	Owned	
1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Year)		Exec any	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr. 8)		ction	4. Securities Acquir (A) or Disposed of (D) (Instr. 3, 4 and 5)			ed 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Form: Direct (D)	7. Nature of Indirect Beneficial Ownership			
							C	ode	V	Amoun	(A) or (D)	Price	ice			or Indirect (I) (Instr. 4)	(Instr. 4)
Common 06			06/17/2008					S		2,500	D	\$ 6.48	7,500			D	
Common	Common		06/17/2008					S		2,500	D	\$ 6.92	5,000			D	
Common			06/17/2008					S		2,500	D	\$ 7.18	2,500			D	
Common 06/17/2008			06/17/2008					S		2,500	D	\$ 6.67	0			D	
Reminder: indirectly.	Report on a	separate line t	for each class of sec	curities	benefici	ally o	wned	direc	tly o	r							
									cont	ained i	n this fo	rm ar	e not req	ection of in Juired to re d OMB cor	spond un	less	EC 1474 (9- 02)
			Table II -											i			
Security	Conversion	3. Transaction Date (Month/Day/	Year) Execution I	d Date, if	4.		5. Number		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. T Am Und Sec	Title and ount of derlying urities str. 3 and	Derivative Security (Instr. 5)		Ownersh Form of Derivativ Security: Direct (Dor Indirect)	Ownersh (Instr. 4)	
					Code	V	(A)	(D)	Date Exer	cisable	Expiration Date	Titl	or Number of Shares				

### **Reporting Owners**

B # 0 N /411	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Nilson Troy F 533 WEST 2600 SOUTH, #25 BOUNTIFUL, UT 84010	X						

## **Signatures**

Troy F. Nilson	06/18/2008
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.