Edgar Filing: Schick Joseph C - Form 4

Schick Josep Form 4 June 05, 201										
FORM	RITIES AND EXCHANGE COMM				OMMISSION	OMB AF OMB Number:	PROVAL 3235-0287			
Check th if no lon subject to Section 7 Form 4 of Form 5 obligation may con See Instr 1(b).	ger o 16. or Filed pur ons tinue.	STATEMENT OF CHANGES IN 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							Expires: January 3 20 Estimated average burden hours per response 0	
(Print or Type	Responses)									
1. Name and Address of Reporting Person <u>*</u> Schick Joseph C		Symbol				-	5. Relationship of I Issuer			
INC., 3303	(First) () FE SOLUTIONS MONTE VILLA Y, SUITE 310		(Month/I	Day/Year)	ransaction			(Check X_ Director Officer (give to below)) Owner r (specify
	(Street)		 Public Utility Holding Company Act of 1935 or Sect) of the Investment Company Act of 1940 2. Issuer Name and Ticker or Trading Symbol BIOLIFE SOLUTIONS INC [BLFS] (Character (Charater (Character (Character (Charat		Applicable Line) _X_ Form filed by Or	oint/Group Filing(Check				
BOTHELL	, WA 98021							•		porting
(City)	(State)	(Zip)	Tab	ole I - Non-l	Derivative	Secu	rities Acqu	uired, Disposed of,	or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	Date, if	Transactic Code (Instr. 8)	omr Dispos (Instr. 3,	(A) or	(D) 5)	Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	06/01/2018			S	6,858	D	\$ 10.0698	14,765	D	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 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 Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Relationships **Reporting Owner Name / Address** Director 10% Owner Officer Other Schick Joseph C C/O BIOLIFE SOLUTIONS, INC. Х 3303 MONTE VILLA PARKWAY, SUITE 310 BOTHELL, WA 98021 Signatures /s/ Joseph C. 06/05/2018 Schick **Signature of Date Reporting Person

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.