FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OWD 7 ti	
OMB Number:	3235-028
Estimated average	e burden

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 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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

1. Name and Address of Reporting Person* <u>ENGLE J MELVILLE</u>					2. Issuer Name <b>and</b> Ticker or Trading Symbol Predictive Oncology Inc. [ POAI ]									(Ch	Relationship eck all appli X Directo	,		rson(s) to Issuer		
(Last) 4152 CA	(Fi	,	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 09/30/2019										(give title		Other ( below)	specify	
(Street) NAPA (City)	C.	tate)	94558 (Zip)		,	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	X Form filed by One Reporting Person Form filed by More than One Reporting Person					
1. Title of Security (Instr. 3) 2. Tra			2. Trans Date	2. Transaction Date Month/Day/Year)			2A. Deemed Execution Date, if any (Month/Day/Year		Code (Instr. 5)		ities Ac	quired	(A) or	5. Amou Securitie Benefici	nt of es ally -ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)		Price	Transac (Instr. 3	ansaction(s) str. 3 and 4)		_	(Instr. 4)	
Common	Stock	Т	āble II -								osed of converti					0		D		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,	4. Transa Code ( 8)				6. Date Exercisal Expiration Date (Month/Day/Year		•	7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	OI N Of	umber	er					
Stock Options (right to	\$0.505	09/30/2019			A		9,900		09/30/20	19 (	09/30/2029	Comm Stock		9,900	\$0	9,900		D		

**Explanation of Responses:** 

/s/ J. Melville Engle

10/03/2019

\*\* Signature of Reporting Person

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.