FORM 4

to Section 16. Form 4 or Form 5 obligations may continue. See

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject

OMB APPROVAL									
OMB Number: 3235-0287									
Estimated average burden									
hours per response.	0.5								

	etion 1(b).	ide. dee		Filed	pursuan or Sec	nt to S ction 3	Section 16(a) of the In	of the Se vestmen	curitie	es Exchange npany Act of	Act of 19 1940	934		nours	s per response:	0.5
1. Name and Address of Reporting Person* <u>CHUNG-WELCH NANCY</u>				2. Issuer Name and Ticker or Trading Symbol Predictive Oncology Inc. [ POAI ]								Relationshi heck all app X Direc	olicable)	ng Person(s) t	o Issuer Owner	
(Last)	(Fir X 1572	est) (f	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 03/31/2022							Offic below	er (give title w)	Othe belo	er (specify w)
(Street) PEPPER (City)			11463 Zip)		4. If An	mendi	ment, Date of	Original	Filed	(Month/Day/	Year)	6. Lin	ie) X Form	n filed by On	p Filing (Chec e Reporting P re than One F	erson
		Table	I - Non-E	Deriva	tive Se	ecur	rities Acq	uired,	Disp	osed of,	or Ben	eficia	ally Own	ed		
1. Title of	Security (Ins		2. Da	Deriva . Transac Date Month/Da	tion	2A. I Exec	Deemed cution Date,	3. Transa Code (I	ction	4. Securities Disposed Of 5)	Acquire	d (A) or	5. Amo Securi Benefi Owned	ount of ties cially d Following	6. Ownership Form: Direct (D) or Indirec (I) (Instr. 4)	of Indirect t Beneficial Ownership
1. Title of	Security (Ins		2. Da	. Transac	tion	2A. I Exec	Deemed cution Date,	3. Transa Code (I	ction	4. Securities Disposed Of	Acquire	d (A) or	5. Amo Securi Benefi Owned Repor Transa	ount of ties cially d Following	Form: Direct (D) or Indirect	of Indirect t Beneficial
1. Title of s	- `		2. Di (N	. Transac	ction ny/Year)	2A. I Exec	Deemed cution Date,	3. Transa Code (I 8)	ction Instr.	4. Securities Disposed Of 5)	Acquired f (D) (Inst	d (A) or r. 3, 4 a	5. Amo Securi Benefi Owned Repor Transa (Instr.	ount of ties cially d Following ted action(s)	Form: Direct (D) or Indirect	of Indirect t Beneficial Ownership
	- `	tr. 3)	2. Di (N	Transac Date Month/Da	etion ny/Year) 2022 ve Sec	2A. I Exec if an (Mor	Deemed cution Date,	3. Transa Code (I 8) Code	ction Instr.	4. Securities Disposed Of 5)  Amount 8,530  esed of, o	(A) or (D)  A  Representation of the control of the	Price	5. Am Securi Benefi Owned Repor Transa (Instr.	ount of ties cially d Following ted action(s) 3 and 4)	Form: Direct (D) or Indirec (I) (Instr. 4)	of Indirect t Beneficial Ownership

**Explanation of Responses:** 

Security

/s/ Nancy Chung-Welch

Title

Expiration

Date

Security (Instr. 3 and 4)

Amount or Number

Shares

04/05/2022

Following Reported

Transaction(s) (Instr. 4)

(I) (Instr. 4)

\*\* Signature of Reporting Person

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

Code

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.

(A) or Disposed

of (D) (Instr. 3, 4 and 5)

(A) (D) Date

Exercisable

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).