FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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

Name and Address of Reporting Person* Schwartz Carl I.						2. Issuer Name and Ticker or Trading Symbol Predictive Oncology Inc. [POAI]									ck all applic	10% Owner			vner
(Last) (First) (Middle) 3750 LAS VEGAS BLVD. SOUTH APT. 4303						3. Date of Earliest Transaction (Month/Day/Year) 07/01/2019									below)		title Other (specify below) Executive Officer		pecify
(Street) LAS VEGAS NV 89158 (City) (State) (Zip)					- 4. I -	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tab	le I - Non	-Deriv	vativ	e Se	curities	s Ac	guired.	Dis	posed o	of, or Bo	enefic	cially	Owned				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D				saction	1	2A. Deeme Execution if any (Month/Da	3. Transaction Code (Instr.		4. Secur	4. Securities Acquired (A) Disposed Of (D) (Instr. 3,			5. Amour Securitie Beneficia Owned F	nt of s ally ollowing	Form (D) o	r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) (D)	or P	rice	Reported Transact (Instr. 3 a	ion(s)			(Instr. 4)
Common Stock														244	14,298		D		
		-	Γable II - I								osed of converti				Owned				•
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution E if any (Month/Day	Date,	Code (In				6. Date E Expiratio (Month/D	n Dat		of Securities			B. Price of Derivative Security Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amo or Num of Sha						
Third Amended and Restated Common Stock Purchase	\$0.704	07/01/2019			J ⁽²⁾		11,506		07/01/20	19	02/06/2024	Commor Stock	11,	506	(2)	1,171,4	105	D	

Explanation of Responses:

1. On May 21, 2019 the Issuer and the Reporting Person executed the Third Amended and Restated Common Stock Purchase Warrant (the "Warrant") which amends and restates that certain warrant issued on November 30, 2018 (the "Original Warrant"). It included a second investment of an additional \$950,000, and a third investment of an additional \$300,000 resulting in a total investment of \$1,620,000. (See Form 4 filed on December 10, 2018 for details of the Original Warrant.) In addition to the shares reported, the Warrant provides for additional shares to be added to the Warrant beginning on February 1, 2019 and the first day of each calendar month thereafter, equal to one-half percent (1/2%) of the outstanding principal balance of the Note on such date, divided by \$0.704.

 $2. \ Represents \ additional \ shares \ added \ to \ the \ Warrant \ as \ of \ 7/1/2019 \ as \ a \ result \ of \ the \ formula \ in \ the \ Third \ Amended \ and \ Restated \ Warrant.$

/s/ Carl I. Schwartz, DDS 07/02/2019

** 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.