FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF (CHANGES	IN BENE	FICIAL	OWNERS	SHIP

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 Skyline Medical Inc. [SKLN]											heck a	all applic Directo	r 10% Owner		wner		
	(Last) (First) (Middle) 3750 LAS VEGAS BLVD. SOUTH APT. 4303					3. Date of Earliest Transaction (Month/Day/Year) 01/26/2017										X Officer (give title Other (specify below) Chief Executive Officer					
(Street) LAS VE (City)			39158 (Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Lir	Individual or Joint/Group Filing (Check Applicable le) X Form filed by One Reporting Person Form filed by More than One Reporting Person							
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
Date			2. Trans Date (Month/I		ar)	2A. Deemed Execution Date, if any (Month/Day/Year		∍,	Code (Instr.					4 and Securit		s ally following	Form (D) o	vnership n: Direct r Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
										Code	v			(A) or (D)	Price	Transac (Instr. 3		ction(s)			(111511.4)
Common Stock															66,173(1)			D			
		7	able II - D									sed of				y Ow	vned				•
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	cution Date, Tra		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable a Expiration Date (Month/Day/Year)				d 7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			Deri Seci	rice of ivative urity tr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Ownershi Form: Direct (D) or Indirect (I) (Instr. 4		Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Dat Exe	e ercisable		epiration ate	Title	O N O	umber						
Stock Options (right to buy)	\$2.8	01/26/2017 ⁽²⁾			A		7,143		01/	/26/2017	12	2/31/2026	Comr		7,143		\$0	7,143		D	
Stock Options (right to buy)	\$2.8	01/26/2017 ⁽²⁾			A		1,786		01/	/26/2017	12	2/31/2026	Comr		1,786		\$0	1,786		D	

Explanation of Responses:

- 1. Share ownership totals have been adjusted to reflect a 1 for 25 reverse stock split effected by the issuer on October 27, 2016.
- 2. Option granted pursuant to agreement dated December 31, 2016, subject to certain conditions which were satisfied on January 26, 2017.

/s/ Carl I. Schwartz, DDS 01/27/2017

** 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.