## FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

| Washington, | D.C. | 20549 |
|-------------|------|-------|
|             |      |       |

## 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

| 1. Name and Address of Reporting Person*  GABRIEL RICHARD L   |  |      |           |         |   | 2. Issuer Name <b>and</b> Ticker or Trading Symbol Precision Therapeutics Inc. [ AIPT ] |  |        |   |   |  |   |     |                                    |   |                                | p of Reportin<br>dicable)<br>ctor   | ng Persor   | 10% C   |  |
|---|--|------|-----------|---------|---|---|--|--------|---|---|--|---|-----|------------------------------------|---|--------------------------------|---|---|---|--|
| (Last) (First) (Middle) 450 B PARADISE RD.  |  |      |           |         |   | 3. Date of Earliest Transaction (Month/Day/Year) 11/20/2018                             |  |        |   |   |  |   |     |                                    |   | Office                         | icer (give title<br>low)  |   | Other (specify below)   |  |
| #281  (Street)  SWAMPSCOTT MA 01907   |  |      |           |         |   | 4. If Amendment, Date of Original Filed (Month/Day/Year)                                |  |        |   |   |  |   |     |                                    | Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person |                                |   |   |   |  |
| (City)  |  |      | Zip)      |         |   |   |  |        |   |   |  |   |     |                                    |   | Pers                           | n filed by Mo<br>on   | re than C   | ne Rep  | orting   |
|   |  | Tabl | e I - Nor | า-Deriv | ative                                   | Se  | curitie  | s Acc  | quired,                                 | Dis   | posed o  | f, or   | Ben | eficia                             | ally (  | Owne                           | ed  |   |   |  |
| 1. Title of Security (Instr. 3)  2. Transa Date (Month/D  |  |      |           |         |   | Execution Da  |  |        | 3.<br>Transaction<br>Code (Instr.<br>8) |   | 4. Securities Acquired (A)<br>Disposed Of (D) (Instr. 3, 4<br>5) |   |     |                                    | nd  | Securities I<br>Beneficially ( |   | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4) | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
|   |  |      |           |         |   |   | Code   | v      | Amount                                  |   | (A) or<br>(D)  | Price   |     | Transaction(s)<br>(Instr. 3 and 4) |   |                                |   | (11341.4)   |   |  |
| Common Stock 11/2   |  |      |           |         | 0/2018                                  |   |  |        | P                                       |   | 1,000  |   | A   | \$ <del>0</del> .                  | 89  | 1,000                          |   | Г   | )   |  |
|   |  | Та   |           |         |   |   |  |        |   |   | sed of,<br>onvertib  |   |     |                                    | y Ov  | vned                           |   |   |   |  |
| 1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercise Price of Derivative Security  Security  3. Transaction Date (Month/Day/Year) if any (Month/Day/ |  |      |           | Date,   | 4.<br>Transaction<br>Code (Instr.<br>8) |   | of<br>Derive<br>Secur<br>Acque<br>(A) or<br>Disposof (D)<br>(Instr | of Exp |   | Date Exercisable and xpiration Date Month/Day/Year) |  | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Instr.<br>and 4)  Amoun<br>or<br>Numbe<br>of |     | ount                               | ıt  |                                | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction<br>(Instr. 4) | Owr<br>Fori<br>Dire<br>or Ir<br>(I) (I                            | nership<br>n:<br>ct (D)<br>ndirect<br>nstr. 4)                    | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |

**Explanation of Responses:** 

/s/ Richard L. Gabriel

11/21/2018

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.