## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
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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

1. Name and Address of Reporting Person <sup>*</sup> GABRIEL RICHARD L						2. Issuer Name and Ticker or Trading Symbol Skyline Medical Inc. [ SKLN ]								elationship eck all app X Direct	licable)	ng Pei	rson(s) to Is: 10% Ow		
(Last)						3. Date of Earliest Transaction (Month/Day/Year) 06/22/2017								Office belov	r (give title )		Other (specify below)		
410 B PARADISE ROAD #281 (Street)						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person					
SWAMPSCOTT MA 01907 (City) (State) (Zip)														Form filed by More than One Reporting Person					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) Date (Month/Day						Execution Date			3. Transact Code (In 8)			ities Acqu d Of (D) (I	ired (A) or nstr. 3, 4	Securi Benefi Owned	es For ially (D) Indi		n:Direct c r E rect(I) C	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) c (D)	Price	Report Transa	Following Reported Transaction(s) (Instr. 3 and 4)		r. 4) (	Instr. 4)	
Common Stock														0		D			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned         (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution Date, if any		4. Transaction Code (Instr. 8)		n of		6. Date Exercisable at Expiration Date (Month/Day/Year)			d 7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)		8. Price of Derivativ Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amount or Number of Shares						
Stock Options (right to buy)	\$1.47	06/22/2017			A		125,000		06/22/201	7 0	06/22/2027	Common Stock	125,000	\$0	125,0	00	D		

Explanation of Responses:

/s/ Richard L. Gabriel

\*\* Signature of Reporting Person Date

06/26/2017

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.