FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, D.C. 20349

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	VAL				
l	OMB Number:	3235-0287				
l	Estimated average burde	en				
l	hours per response:	0.5				

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

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1. Name and Address of Reporting Person* Reding Andrew P.							2. Issuer Name and Ticker or Trading Symbol Skyline Medical Inc. [SKLN]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
															Directo	r		10% Ov	/ner		
(Last)	`	irst)		3. Date of Earliest Transaction (Month/Day/Year) 06/30/2016									Officer below)	(give title		Other (s below)	pecify				
		DICAL INC.																			
C/U 5K	LINE ME	DICAL INC.	4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable								
(Street)					-									ne) X	F #	ll l : O	D	ti	_		
EAGAN	M	N	55121													m filed by One Reporting Person m filed by More than One Reporting son					
(City)	(S	tate)	(Zip)																		
		Tab	le I - Non	-Deriv	vativ	e Se	curities	s Acq	uired, [Disp	osed o	f, or Be	neficia	ılly (Owned						
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						ear)	2A. Deemed Execution Date, if any (Month/Day/Year		Transaction Dispose Code (Instr. 5)		ties Acquir d Of (D) (Ins		4 and Securitie Beneficia Owned F		es Formally (D) (Following (I) (I		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)			Reported Transacti (Instr. 3 a	ction(s)			(Instr. 4)		
Common	Stock, \$.01	par value										1,314			D						
		-	Table II - I									or Ben ble secu			wned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day)	Date,	4. Transaction Code (Instr 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		De Se	Price of erivative ecurity istr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v	(A)		Date Exercisable		xpiration ate	Title	Amour or Numbe of Shares	r							
Stock Option (right to buy)	\$0.15	06/30/2016			A		33,334		06/30/2016	0	5/30/2026	Common Stock	33,33	4	\$0	33,334	4	D			

Explanation of Responses:

/s/ Andrew P. Reding

07/06/2016

** 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.