FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to Section 16. Form 4 or Form 5

OMB APPROVAL									
OMB Number: 3235-0287									
Estimated average burden									
hours per response:	0.5								

obligations may continue. See Instruction 1(b).	pursuan	t to Section 16(a) o	f the Se	curitie	es Exchange A	34		hours per response:		0.5		
(,)			tion 30(h) of the Inv									
1. Name and Address of Reporting Person* Reding Andrew P.		er Name and Ticker <u>sion Therape</u>					k all applicable Director	,		Owner		
(Last) (First) (Middle 2915 COMMERS DRIVE, SUITE 900)	3. Date 06/30/	of Earliest Transac /2018	ction (M	onth/E	Day/Year)		Officer (give title below)		Other (specify below)		
C/O PRECISION THERAPEUTICS INC.			nendment, Date of 0	(Month/Day/Y	6. Indi Line)	vidual or Joint/	oint/Group Filing (Check Applicable					
(Street) EAGAN MN 55121								X	Form filed by One Reporting Perso Form filed by More than One Repo Person			
(City) (State) (Zip)												
Table I -	Non-Deriva	tive S	ecurities Acqu	ıired,	Disp	osed of, o	or Ben	eficially	Owned			
1. Title of Security (Instr. 3)	2. Transa Date (Month/Da		2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Disposed Of 5)			5. Amount of Securities Beneficially Owned Following Reported	ving	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
				Code	v	Amount	(A) or (D)	Price	Transaction(s (Instr. 3 and 4			(Instr. 4)
Common Stock, \$.01 par value									53		D	
Table	II - Derivati	ve Sec	curities Acqui	red, D	ispo	sed of, or	Benef	icially C	Owned			

	(e.g., puts, calls, warrants, options, convertible securities)															
De Se	Fitle of rivative curity str. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		of		6. Date Exerc Expiration Da (Month/Day/\)	ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)			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 Exercisable	Expiration Date	Title	Amount or Number of Shares				
	ck tion ght to	\$1.13	06/30/2018		A		4,425		06/30/2018	06/30/2028	Common Stock	4,425	\$0	4,425	D	

Explanation of Responses:

buy)

/s/ Andrew P. Reding

07/02/2018

** 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.