FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
	OMB Number:	3235-0287								
1	Estimated average hurden									

0.5

hours per response:

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

	(,,					on 30(h) of the							•		-			
1. Name and Address of Reporting Person*  Reding Andrew P.					2. Issuer Name <b>and</b> Ticker or Trading Symbol Skyline Medical Inc. [ SKLN ]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
												X Directo	or		10% Ov	ner		
(Last) (First) (Middle) 2915 COMMERS DRIVE, SUITE 900 C/O SKYLINE MEDICAL INC.				3. Date of Earliest Transaction (Month/Day/Year) 01/26/2017									Officer (give title below)		Other (s below)			
				4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street)													- 1	,	filed by On	e Repo	rting Perso	n
EAGAN	M	N	55121											Form to		re than	One Repo	rting
(City)	(S	tate)	(Zip)															
		Tab	le I - Nor	-Deriva	ative Se	curities Ac	qu	ired,	Disp	osed c	of, o	r Bene	eficial	ly Owned	d			
1. Title of Security (Instr. 3)  2. Transa Date (Month/D				ay/Year)	2A. Deemed Execution Date if any (Month/Day/Ye	cution Date,		Transaction D Code (Instr. 5)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)			Securition Benefici Owned I	5. Amount of Securities Beneficially Owned Following Reported		Direct Indirect Istr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount		(A) or (D)	Price	Transac (Instr. 3	tion(s)			iiisii. 4)
Common Stock, \$.01 par value													53(1)			D		
		7				urities Acq s, warrants								Owned				
1. Title of Derivative Security (Instr. 3)	tive Conversion Date Execution Date, ty or Exercise (Month/Day/Year) if any			ransaction ode (Instr. )		Expiration Date (Month/Day/Year) (Month/Day/Year) rosed ) r. 3, 4				And 7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)  8. Price of Derivative Securities Securities Beneficies Owned Following Reported Transacti (Instr. 4)		illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Natur of Indirec Beneficia Ownershi (Instr. 4)	

Date Exercisable

01/26/2017

(D)

(A)

8,929

Expiration

12/31/2026

Date

Title

Common

## **Explanation of Responses:**

\$2.8

Stock Option

(right to buy)

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

v

Code

Α

<u>/s/ Andrew P. Reding</u> <u>01/27/2017</u>

\*\* Signature of Reporting Person Date

Amount or Number

of Shares

8,929

\$<mark>0</mark>

8,929

D

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).

01/26/2017(2)

\*\* 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.