Urdea Michael S Form 4 November 28, 2018

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB

Washington, D.C. 20549

3235-0287 Number: January 31, Expires:

OMB APPROVAL

if no longer subject to Section 16. Form 4 or Form 5

obligations

Check this box

2005 Estimated average burden hours per response... 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue.

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

See Instruction

1. Name and Address of Reporting Person ** Urdea Michael S			2. Issuer N Symbol	Name and T	Cicker or Trading	5. Relationship of Reporting Person(s) to Issuer				
		PRESSUI [PBIO]	RE BIOS	CIENCES INC	(Check all applicable)					
(Last)	(First)	(Middle)	3. Date of E	Earliest Trai	nsaction	_X_ Director				
100 BOUNCE MEADOWS DRIVE			(Month/Day 11/27/201	′		below)	below)	eOther (specify below)		
(Street)			4. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check				
			Filed(Month	/Day/Year)		Applicable Line) _X_ Form filed by C	ne Reporting Pe	ercon		
ALAMO, CA	94507					Form filed by M Person				
(City)	(State)	(Zip)	Table 1	I - Non-De	rivative Securities Acq	uired, Disposed of	, or Beneficia	lly Owned		
1.Title of		on Date 2A. De		3.	4. Securities Acquired		6.	7. Natur		

		14010 1				qu	ca, 2 isposea oi	, 01 201101101	., 0 ., 11001
1.Title of	2. Transaction Date	2A. Deemed	3.	4. Securi	ties Ac	quired	5. Amount of	6.	7. Nature of
Security	(Month/Day/Year)	Execution Date, if	Transactio	on(A) or Di	isposed	d of	Securities	Ownership	Indirect
(Instr. 3)		any	Code (D)		Beneficially	Form: Direct	Beneficial		
		(Month/Day/Year)	(Instr. 8)	(Instr. 3, 4 and 5)		Owned	Owned (D) or		
							Following	Indirect (I)	(Instr. 4)
							Reported	(Instr. 4)	
					(A)		Transaction(s)		
			G 1 17		or	ъ.	(Instr. 3 and 4)		
			Code V	Amount	(D)	Price			
COMMON STOCK	11/27/2018		J	340	A	\$ 3.67	14,013	D	

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

Persons who respond to the collection of **SEC 1474** information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

Edgar Filing: Urdea Michael S - Form 4

1. Title of	2.	3. Transaction Date		4.	5.	6. Date Exerc		7. Titl		8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration D	ate	Amou	ınt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(Instr. 5)	Bene
	Derivative		•		Securities	3		(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						(2.11541
					4, and 5)						
					i, and 3)						
									Amount		
						Data	Evaluation		or		
						Date	Expiration	Title	Number		
						Exercisable	Date		of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			

Urdea Michael S 100 BOUNCE MEADOWS DRIVE X ALAMO, CA 94507

Signatures

/s/ Michael S Urdea

11/28/2018

**Signature of Reporting Person Date

Explanation of Responses:

- * 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).

Dalatianshin

Remarks:

Dividend on Series AA Convertible Preferred Stock paid in shares of common stock.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

Reporting Owners 2