## FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
OMB Number: 3235-0287
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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 OF SECURITIES

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 ar														
Name and Address of Reporting Person *  Pease Martha			2. Issuer Name and Ticker or Trading Symbol BioSig Technologies, Inc. [BSGM]					:	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director					
	SIG TECH	(First) HNOLOGIES 2ND FLOOF		3. Date of Earliest 11/15/2019	Transaction	on (Mon	th/Day/	Year)		Office	er (give title belo	ow)	Other (specify b	pelow)
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)					-	6. Individual or Joint/Group Filing(Check Applicable Line)  _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
WESTPO (City	ORT, CT 0	(State)	(Zip)					•.•				S 67 1 11	0 1	
		` ′			1	-				equired, Disposed of, or Beneficially Owned				lg 37 .
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		f Code (Instr. 8)		(A) or Disposed of (Instr. 3, 4 and 5)		of (D)	Beneficia Reported	nt of Securities ally Owned Following I Transaction(s)		Ownership Form:	Beneficial
				(Month/Day/Year)	Code	VA	Amount	(A) or (D)	Price	(Instr. 3 and 4)		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common value per	Stock, \$0	.001 par	11/15/2019		Р		,000	Δ	ď	1,000			D	
											ction of inf			1474 (9-02)
			Table II - l	Derivative Securiti	ies Acquir	contain the for	ned in rm dis	this for plays a	rm are currer	not requally valid	uired to res OMB con	ormation spond unle trol numbe	ss	1474 (9-02)
1 Title of	I <sub>2</sub>	2 Transaction	(	e.g., puts, calls, wa	irrants, oj	the for	ned in rm dis posed o onverti	this for plays a f, or Ben ible secu	rm are currer reficiall	not requally valid	uired to res	spond unle trol numbe	ss r.	. ,
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Y	3A. Deemed Execution Da any	e.g., puts, calls, wa 4. Transaction Code Year) (Instr. 8)	<mark>irrants, oj</mark> 5.	contain the formed, Dispotions, contain the formed of the	ned in rm dis oosed o	this for plays a f, or Ben ible secu isable n Date	rm are currer reficiall rities)  7. Tir Amo Unde Secure	not requally valid	uired to res	spond unle trol numbe	of 10. Owners Form of Derivati Security Direct ( or Indire	11. Natur of Indire Beneficia Ownersh (Instr. 4)

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Pease Martha C/O BIOSIG TECHNOLOGIES, INC. 54 WILTON ROAD, 2ND FLOOR WESTPORT, CT 06880	X				

### **Signatures**

/s/ Kenneth L. Londoner, attorney-in-fact	11/15/2019
-*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).

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.