FORM 4

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

OMB APPE	ROVAL
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

	pe Response	3)														
1. Name and Address of Reporting Person* ZELDIS JEROME B			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 10% Owner						
(Last) (First) (Middle) C/O BIOSIG TECHNOLOGIES, INC., 54 WILTON ROAD, 2ND FLOOR			3. Date of Earliest Transaction (Month/Day/Year) 04/14/2020							Officer (give	e title below)	Other	(specify below)			
(Street) WESTPORT, CT 06880			4. If Amendment, Date Original Filed(Month/Day/Year)						_X_ F	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person						
(Cit	y)	(State)	(Zip)			Table	I - Non-	-Deriv	ative Secur	ities A	cquired,	Disposed	of, or Bene	ficially Owned	I	
1.Title of S (Instr. 3)	Date		2. Transaction Date (Month/Day/Year)	any	eemed tion Date, if h/Day/Year)	Code (Inst	(Instr. 8)		4. Securities Acqu (A) or Disposed of (Instr. 3, 4 and 5)					d Ov Fo Di	wnership orm: irect (D) Ov	Nature Indirect eneficial wnership nstr. 4)
						C	ode V	V Ar	nount (A)		ice			(I)) nstr. 4)	
Reminder:	Troport on a c				-,		Per in t	rsons this fo		t requ	ired to	respond	unless the	tion containe form	d SEC 14	74 (9-02)
Kemmuer:	Topon on a			Derivati	ive Secur	ties Ac	Per in t dis	rsons this fo splays	orm are no a current sed of, or B	t requ ly vali eneficia	ired to did OMB of ally Own	respond control n	unless the		d SEC 14'	74 (9-02)
1. Title of Derivative Security		3. Transaction Date	Table II - 3A. Deemed Execution Date, if	Derivati (e.g., put 4. Transac Code	ive Secur ts, calls, v 5. N tion of D Secut) Acquor D of (I (Inst	ties According to the control of the	quired, l ts, option 6. Date Expira (Mont	rsons this for splays Dispos ns, con the Exer ation D	sed of, or B vertible se	eneficia curities 7.7 of Sec	ired to did OMB of ally Own	respond control n ned Amount	unless the umber.	9. Number of Derivative Securities Beneficially Owned Following Reported	10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Natur of Indirec Beneficia
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date	Table II - 3A. Deemed Execution Date, if any	Derivati (e.g., put 4. Transac Code	ive Secur ts, calls, v 5. N tion of D Secu) Acqu or D of (I	ties Acranimber erivative rities sired (Asposed P) : 3, 4, 6)	Quired, I dis., option 6. Date Exerci	rsons this for splays Dispos ns, con the Exer ation D th/Day.	sed of, or Bevertible se cisable and Date //Year)	eneficia curities 7.7 of Sec	ally Own s) Title and Underlyic curities astr. 3 and	respond control n ned Amount	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following	10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Natur of Indirec Beneficia Ownersh

Reporting Owners

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

Signatures

/s/ Kenneth L. Londoner, attorney-in-fact	04/16/2020
**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).
- (1) The option vested in full on April 14, 2020.

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.