FORM	4
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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).

(Print or Type Perponses)

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

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SEC 1474 (9-02)

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 and Address of R LONDONER KENN	2. Issuer Name BioSig Techt			0	•		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner						
(Last) (C/O BIOSIG TECHN WILTON ROAD, 2N	3. Date of Earlie 03/16/2020	est Transac	tion	(Month/Da	ay/Yea	X Officer (give title below) Other (specify below) Chief Executive Officer							
WESTPORT, CT 068	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						
(City)	(State)	(Zip)		Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									
1.Title of Security (Instr. 3)			2A. Deemed Execution Date, if any (Month/Day/Year)	Code	on	(A) or Disposed of (D)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect	Beneficial Ownership		
				Code	v	Amount	(A) or (D)	Price		(I) (Instr. 4)	(Instr. 4)		
Common Stock		03/16/2020		Р		8,800	А	\$ 2.76 (1)	1,270,791	D			
Common Stock									1,181,324	I	By Endicott Managemer Partners, LLC (2)		

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

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 control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)															
1. Title of	2.	3. Transaction	3A. Deemed	4.		5.		6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transacti	tion Number		and Expirati	tion Date Amount of		Derivative	Derivative	Ownership	of Indirect		
Security	or Exercise	(Month/Day/Year)	any	Code	of		(Month/Day	/Year)	Underlying		Security	Securities	Form of	Beneficial	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)		Derivative		Securities		ities	(Instr. 5)	Beneficially	Derivative	Ownership	
	Derivative				Securities				(Instr. 3 and			Owned	Security:	(Instr. 4)	
	Security			Acquired				4)			Following	Direct (D)			
				(A) or							Reported	or Indirect			
				Disposed							Transaction(s)	(I)			
				of (D)							(Instr. 4)	(Instr. 4)			
				(Instr. 3,											
					4, and 5)										
											Amount				
								Date	Expiration		or				
								Exercisable		Title	Number				
								Exercisable	Date		of				
				Code	V	(A)	(D)				Shares				

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
LONDONER KENNETH L C/O BIOSIG TECHNOLOGIES, INC. 54 WILTON ROAD, 2ND FLOOR WESTPORT, CT 06880	Х	Х	Chief Executive Officer				

Signatures

**Signature of Reporting Person

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).

Date

- Represents the weighted average price of shares purchased in multiple transactions at prices ranging from \$2.66 to \$3.14, inclusive. The Reporting Person undertakes to (1) provide to BioSig Technologies, Inc., any security holder of BioSig Technologies, Inc. or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price within the range set forth herein.
- (2) The Reporting Person is the beneficial owner of Endicott Management Partners, LLC.

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.