FORM	4
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C	Theck this box if no
lo	onger subject to
S	ection 16. Form 4 or
F	orm 5 obligations
n	nay continue. See
I	nstruction 1(b).

(Print or Type Pesponses)

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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

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

(Print or Type Responses)											
1. Name and Address of Reportin LONDONER KENNETH	2. Issuer Nam BioSig Tech			0	•	ol	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_Director _X_ 10% Owner				
(Last) (First) C/O BIOSIG TECHNOLC WILTON ROAD, 2ND FI	3. Date of Earli 11/10/2020	est Transa	ction	(Month/I	Day/Ye	ear)	X_Officer (give title below)Other (specify below)Ot				
(Street) WESTPORT, CT 06880	4. If Amendme	nt, Date Or	rigina	al Filed(M	onth/Day	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 - 1	Non-	Derivativ	e Secu	irities Aco	l iired, Disposed of, or Beneficially Owned			
1.Title of Security (Instr. 3)	Date H (Month/Day/Year) a	2A. Deemed Execution Date, if my Month/Day/Year)	3. Transactio Code (Instr. 8)	on	(A) or Disposed of (D) B (Instr. 3, 4 and 5) R		d of (D)	eneficially Owned Following Ownership Ind eported Transaction(s) Form: Be nstr. 3 and 4) Direct (D) Ow		Beneficial Ownership	
			Code	v	Amount	(A) or (D)	Price		or Indirect (I) (Instr. 4)	(Instr. 4)	
Common Stock	11/10/2020		Р		200	А	\$ 3.5094	1,312,058	D		
Common Stock	11/10/2020		Р		5,000	А	\$ 3.43	1,317,058	D		
Common Stock	11/10/2020		Р		1,000	А	\$ 3.41	1,318,058	D		
Common Stock	11/10/2020		Р		1,000	А	\$ 3.545	1,319,058	D		
Common Stock								1,181,324	I	By Endicott Managemen Partners, LLC (1)	

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

SEC 1474 (9-02)

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		6. Date Exercisable		7. Title and		8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transact	ion	Num	Number and Expirat		on Date	Amount of		Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		of	of (Month/Day/Year) U		Unde	rlying	Security	Securities	Form of	Beneficial	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)		Deriv	Derivative		Securities (Instr		(Instr. 5)	Beneficially	Derivative	Ownership	
	Derivative					Secur	Securities ((Instr. 3 and			Owned	Security:	(Instr. 4)	
	Security					Acqu	Acquired 4		4)			0	Direct (D)		
						(A) or						1	or Indirect		
							Disposed						Transaction(s)		
							of (D)					(Instr. 4)	(Instr. 4)		
						· ·	ıstr. 3,								
						4, and	nd 5)								
											Amount				
								Date	Expiration		or				
								Exercisable		Title	Number				
								Excicisable	Date		of				
				Code	V	(A)	(D)				Shares				

Reporting Owners

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

Signatures

/s/ Kenneth L. Londoner, attorney-in-fact	11/12/2020
**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).

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(1) 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.