#### Edgar Filing: Irani Zackary S. - Form 4

Inon: Zoolsom, C

Form 4											
February 09, <b>FORM</b>	Л	D STATE	S SECUR	RITIES A	ND EXC	CHAI	NGE (	COMMISSION		PPROVAL	
Check this if no long subject to Section 16	er STATI	Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF								Number: 3235-028 Number: January 31 Expires: 200 Estimated average burden hours per	
Form 4 or Form 5 obligation may conti <i>See</i> Instru- 1(b).	Filed p s Section 1									•	
(Print or Type R	esponses)										
			Symbol	2. Issuer Name <b>and</b> Ticker or Trading Symbol BIOMERICA INC [BMRA]				5. Relationship of Reporting Person(s) to Issuer			
(Last) (First) (Middle) 3. D (Mc			<ol> <li>Date of (Month/D)</li> </ol>	3. Date of Earliest Transaction (Month/Day/Year) 02/09/2018				(Check all applicable) X DirectorX 10% Owner X Officer (give title Other (specify below) below) Chief Executive Officer			
			ndment, Date Original nth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person				
IRVINE, CA	92614							Form filed by M Person	Iore than One Re	eporting	
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Acc	quired, Disposed of	f, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction I (Month/Day/Ye	ear) Execut any	emed ion Date, if n/Day/Year)	Code (Instr. 8)	4. Securit on(A) or Di (D) (Instr. 3,	sposed	d of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock	02/09/2018			P	500	A	\$ 3.83	860,539	D		

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)

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1. Title of Derivative Security	2. Conversion or Exercise	3. Transaction Date (Month/Day/Year)		4. Transact Code	5. ionNumber of	6. Date Exer Expiration D (Month/Day)	Date	7. Title and A Underlying S (Instr. 3 and 4	Securities	8. Price o Derivativ Security
(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8)		re s l			.,	(Instr. 5)
				Code V	7 (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Non qualified stock option	<u>(2)</u>					<u>(1)</u>	<u>(1)</u>	Common Stock	280,000	

# **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships						
	Director	10% Owner	Officer	Other			
Irani Zackary S. 17571 VON KARMAN AVE. IRVINE, CA 92614	Х	Х	Chief Executive Officer				
Signaturos							

### Signatures

/s/ Zackary Irani	02/09/2018
<u>**</u> 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) Exercisable at varying dates and exercise prices.
- (2) Not applicable.

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.