FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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Check this box if no longer subject to	STATEMENT OF CH
Section 16. Form 4 or Form 5	
obligations may continue. See	
Instruction 1(b).	Filed pursuant to S

HANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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 Reporting Person* <u>Green James W</u>							2. Issuer Name and Ticker or Trading Symbol HARVARD BIOSCIENCE INC [HBIO]									lationshi ck all app Dired	,	ng Perso	on(s) to Is	
(Last) C/O HAF	RVARD B		ICE, INC	Middle)			ate of 24/20		st Trans	saction (I	Month	/Day/Year)				Offic below	icer (give title ow)		Other (specify below)	
84 OCTO (Street) HOLLIS' (City)	ΓON M	MA State)	0	1746 Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									dividual or Joint/Group Filing (Check Applicable) K Form filed by One Reporting Person Form filed by More than One Reporting Person				
			Tabl	e I - No	n-Deriv	ative	Sec	uritie	s Ac	quired	l, Dis	sposed o	f, or E	Benefi	cially	/ Own	ed			
Date				2. Transac Date (Month/Da		Exe if a	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a 5)			or and	nd Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
										Code	v	Amount	(A) (D)	or Pri	се	Reporte Transac (Instr. 3	ction(s)			(Instr. 4)
Common Stock 05/24						2018	.018			Α		18,100 ⁽¹) A	\$	0.00	157	,312(2)	Ι)	
Common Stock																2	2,000		[by James W Green Revocable Trust
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Execution Date, or Exercise (Month/Day/Year) if any				on Date,		ansaction of ode (Instr. Derivative		rative rities ired r osed)	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title Amour Securi Under Deriva Securi and 4)	nt of ties ying	t		9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y Ov Fo Dii or (I)	wnership orm: rect (D) Indirect (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
						Code	Code V (A)		(D)	Date Exercis	Expiration Sable Date Tit		Title	of Shares						

Explanation of Responses:

1. Represents a deferred stock award of 18,100 restricted stock units which fully vest on the earlier to occur of (i) the date of the Issuer's next Annual Meeting of Stockholders after May 17, 2018, immediately prior to the commencement of such meeting, and (ii) May 24, 2019.

2. Includes (a) a deferred stock award of 18,100 restricted stock units which fully vest on the earlier of (i) the date of the Issuer's next Annual Meeting of Stockholders after May 17, 2018, immediately prior to the commencement of such meeting, and (ii) May 17, 2019; (b) a deferred stock award of 16,875 restricted stock units which vest quarterly in equal installments on June 30, 2018, September 30, 2018 and December 31, 2018; and (c) 122,337 shares of common stock held by the Reporting Person.

Remarks:

This form has been signed under power of attorney.

/s/ Chad Porter, by power of 05/29/2018 attornev

** Signature of Reporting Person Date

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

- * 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.

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 Number.