SEC Form 4	
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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			0	or Section So(n) of the	nivesim		Simpany Act of	1940					
1. Name and Addre Skystone Ad			. Issuer Name and Ticl HARVARD BIO					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner					
(Last) TWO INTERN SUITE 1800	(First) ATIONAL PLA	(Middle)		. Date of Earliest Trans 18/08/2007	saction ((Month	n/Day/Year)		Officer (give title below)		Other (specify pelow)		
			4.	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable			
(Street)									Line)	Form filed by O	ne Reporting	Person	
BOSTON	MA	02110							X	X Form filed by More than One Reporting Person			
(City)	(State)	(Zip)											
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned												
Date			2. Transaction Date (Month/Day/Yea	Execution Date, Transaction Disposed Of (D) (Instr. 3, 4					5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	t Indirect		
					Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1150.4)	

	I						1	
Common Stock	08/08/2007	Р	23,225	A	\$4.7794	4,560,333	Ι	See Footnote ⁽¹⁾
Common Stock	08/09/2007	Р	50,077	A	\$4.5841	4,610,410	Ι	See Footnote ⁽¹⁾
Common Stock	08/10/2007	Р	27,948	A	\$4.3223	4,638,358	I	See Footnote ⁽¹⁾

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

(e.g., puts, calls, warrants, options, convertible securities)

			(5-, -	, .	,			, - ,			,				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year) 4. Transactic Code (Inst 8)			5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
1. Name and Address of Reporting Person* <u>Skystone Advisors LLC</u>															
(Last)(First)(Middle)TWO INTERNATIONAL PLACESUITE 1800															
(Street)															

 (City)
 (State)
 (Zip)

 1. Name and Address of Reporting Person*

 Nelson Kerry

MA

BOSTON

(City)

02110

(Zip)

(Last)	(First)	(Middle)
C/O SKYSTO	NE CAPITAL MA	NAGEMENT LP
TWO INTERN	IATIONAL PLAC	E, SUITE 1800
(Street)		
BOSTON	MA	02110

(State)

Explanation of Responses:

1. Shares reported herein represent shares held by HSO Limited Partnership and HSE Master Fund Limited Partnership. Skystone Advisors LLC is the investment member of the general partner of HSO Limited Partnership and the general partner of HSE Master Fund Limited Partnership. Ms. Nelson is the managing member of Skystone Advisors LLC. Each of Ms. Nelson and Skystone Advisors LLC disclaims beneficial ownership of such shares reported herein, except to the extent of its or her pecuniary interest therein, and the inclusion of the shares reported herein shall not be deemed an admission of beneficial ownership of such shares for purposes of Section 16 or for any other purpose.

> /s/Skystone Advisors LLC by 08/10/2007 Kerry Nelson, Managing <u>Member</u> 08/10/2007 /s/Kerry Nelson Date

** Signature of Reporting Person

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.