FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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

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* HSO LIMITED PARTNERSHIP						2. Issuer Name and Ticker or Trading Symbol HARVARD BIOSCIENCE INC [HBIO]										Check all [(app Direc	tor er (give title	g Per	10% C	wner (specify
(Last) (First) (Middle) THE CAYMAN CORPORATE CENTRE, 4TH FLOOR 27 HOSPITAL ROAD						3. Date of Earliest Transaction (Month/Day/Year) 08/28/2006										,	elov	v)		below)	
(Street) GEORGETOWN, GRAND E9 00000 CAYMAN (City) (State) (Zip)					4. If	f Ame	endme	nt, Da	te of	Original	Filed	(Month/Da	ay/Ye	ar)		ine) X I	orm=	r Joint/Group I filed by One I filed by Mo	e Rep	orting Pers	on
		Tabl	e I - Nor	n-Deriv	ative	Se	curit	ies A	Acqı	uired,	Dis	posed o	f, o	r Ben	efici	ally O	vne	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						ar) i	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				4 and Seci		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
											v	Amount		(A) or (D)	Price	Tr	Transaction(s) (Instr. 3 and 4)				(1130.4)
Common Stock 08/28/2					2006					P		3,619		A	\$4.	25	3,127,592			D	
Common Stock 08/29/2					2006				P		1,300		A	\$4.25		3,128,892			D		
Common Stock 08/30/2					2006					P		54,515		A	\$4.	4.25 3,		183,407		D	
		Та	able II - I									sed of, onvertib				y Own	ed				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security 3. Transaction Date Executio if any (Month/Day/Year)		Date, Transact Code (In:					e (i	5. Date E: Expiration Month/D	n Date		7. Title and Amount of Securities Underlying Derivative Security (Instand 4) Amount of Security (Instand 4) Amount of Number of Number of Number of Share Share Share Security (Instand 4)		ount nber	8. Price Derivat Securit (Instr. 5	ive			0. Ownership orm: Direct (D) r Indirect) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Explanation of Responses:

/s/ HSO Limited Partnership, by Skystone Advisors LLC, 08/30/2006 **Investment Member of the**

General Partner, by Kerry Nelson, Managing Member

** 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.