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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Section 16(a) of the Securities Excha a A at -1 100 -

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

| 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 Add | 1 6 | Person [*] | 2. Issuer Name and Ticker or Trading Symbol <u>HARVARD BIOSCIENCE INC</u> [HBIO] | | tionship of Reporting Pel all applicable) Director | 10% Owner |
| | O NOVA ANALYTIC | | 3. Date of Earliest Transaction (Month/Day/Year) 05/24/2007 | | Officer (give title below) | Other (specify below) |
| 6E GUILD ST | KEE I | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indiv Line) | idual or Joint/Group Filin | g (Check Applicable |
| (Street) | | | | X | Form filed by One Rep | orting Person |
| WOBURN | MA | 01801 | | | Form filed by More that Person | In One Reporting |
| (City) | (State) | (Zip) | | | | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transa Code (8) | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---------------------------------|--|---|------------------------------|---|---|---------------|-------|------------------------------------|---|---|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (1130. 4) |

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) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transa Code (8) | | 5. Num of Deriva Securi Acquir (A) or Dispos of (D) (Instr. and 5) | tive ties ed sed 3, 4 | 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 | | | | |
| Non- qualified Stock Option (right to buy) | \$5.17 | 05/24/2007 | | A | | 5,000 | | (1) | 05/24/2017 | Common Stock, par value \$0.01 per share | 5,000 | \$5.17 | 5,000 | D | |

Explanation of Responses:

1. The shares vest in three equal installments on May 25, 2008, 2009 and 2010.

/s/ Bryce Chicoyne, by power 05/25/2007 of attorney

** Signature of Reporting Person Date

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

 \ast 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.