FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Ty	pe Response	es)													
1. Name and Address of Reporting Person *- Lazarev Alexander V				2. Issuer Name and Ticker or Trading Symbol PRESSURE BIOSCIENCES INC [PBIO]						5. Re	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X Officer (give title below) Other (specify below) VP of Research & Development				
(Last) (First) (Middle) 18 WINCHESTER DRIVE				3. Date of Earliest Transaction (Month/Day/Year) 12/19/2018						X					
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)						_X_ F	6. Individual or Joint/Group Filing(Check Applicable Line) X_Form filed by One Reporting Person Form filed by More than One Reporting Person				
	TON, MA		(T)								Jill liled by	wore than one	reporting reison		
(City) (State) (Zip)				Table I - Non-Derivative Securities Acqui						Acquired,	ired, Disposed of, or Beneficially Owned				
(Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Dat any (Month/Day/Y		ate, if	3. Trans Code (Instr. 8)	(A) (Ins	or Disposed or or 3, 4 and 5) (A) or (D)	f (D) Owner Trans		Securities Bring Reporte	on (I	wnership orm: Be irect (D) Ov Indirect (Ir	Nature Indirect eneficial wnership nstr. 4)	
Reminder:	Report on a s	separate line for eac	Table II - 1	Derivativ	ve Se	ecuritie	s Acqui	Persons containe form dis	who respond d in this form plays a curre ed of, or Benef vertible securi	n are not r ently valid ficially Own	equired OMB co	to respon	d unless the		74 (9-02)
1. Title of	2.	3. Transaction	3A. Deemed	4.	s, ca	1		1	rcisable and	7. Title and	d	8. Price of	9. Number of	10.	11. Nature
Derivative Security (Instr. 3)	Conversion		Execution Date, if	Transaction Code				Expiration Date (Month/Day/Year)		Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)	Derivative Securities Beneficially Owned Following Reported Transaction(s)	Form of Derivative Security: Direct (D) or Indirect (I)	of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4)	
Non- Qualified Stock Option	\$ 3.4	12/19/2018(1)		D			5,000	<u>(1)</u>	07/18/2028	Common Stock	5,000	\$ 0	0 (3)	D	
Incentive	;	12/19/2018(1)		A		5,000		(2)	12/19/2028	Common Stock	5,000	\$ 0	5,000 (4)	D	

Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address		10% Owner	Officer	Other				
Lazarev Alexander V 18 WINCHESTER DRIVE LEXINGTON, MA 02420			VP of Research & Development					

Signatures

/s/ Alexander V Lazarev	12/21/2018
**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) The reported transactions involved an amendment of an outstanding stock option, resulting in the deemed cancellation of the old stock option granted on July 18, 2018 and the grant of a replacement stock option dated December 19, 2018, which includes the same exercise price of \$3.40 and a new expiration date of December 19, 2028.
- (2) Stock options vest 5/36th for the first month then 1/36th per month for the remaining months for a total of 36 months.
- (3) 2015 Nonqualified Stock Option Plan.
- (4) 2013 Equity Incentive Plan.

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.

