Check this box if no longer subject to Section 16. Form 4 or Form 5 may continue. See Instruction 1(b).	STATES SECU Wa IENT OF CHAN suant to Section 1 a) of the Public U 30(h) of the In	NGES IN SECUF 16(a) of th Utility Hol	, D.C. 20 BENEFI RITIES le Securit ding Com	549 CIA ies E ipany	L OWN xchange	ERSHIP OF Act of 1934, 1935 or Sectior	OMB Number: Expires: Estimated a burden hour response	•	
(Print or Type Responses)									
1. Name and Address of Reporting Rice Michael	ssuer Name and Ticker or Trading bol DLIFE SOLUTIONS INC [BLFS]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) (First) (I		of Earliest T	ransaction				••		
C/O BIOLIFE SOLUTIONS INC., 3303 MONTE VILLA PARKWAY, SUITE 310					· · · · · · · · · · · · · · · · · · ·	give title Other (specify below) President & CEO			
(Street)	4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
BOTHELL, WA 98021						Form filed by M Person	ore than One Re	porting	
(City) (State)	(Zip) Tab	ole I - Non-I	Derivative	Securi	ities Acqu	iired, Disposed of,	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactic Code (Instr. 8) Code V	4. Securit or(A) or Dis (Instr. 3, 4)	sposed	of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common 10/01/2018 Stock		M	12,540	A A		152,057	D		
Common 10/01/2018 Stock		S <u>(1)</u>	12,540	D	\$ 17.57 (2)	139,517	D		

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

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 control number.

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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. Transactic Code (Instr. 8)	5. Number of orDerivative 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 Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option	\$ 1.26	10/01/2018		М	12,540	(3)	02/26/2019	Common Stock	12,540

Reporting Owners

Reporting Owner Name / Address	Relationships				
1	Director	10% Owner	Officer	Other	
Rice Michael					
C/O BIOLIFE SOLUTIONS, INC.	v		President		
3303 MONTE VILLA PARKWAY, SUITE 310	Х		& CEO		
BOTHELL, WA 98021					

Signatures

/s/ Michael Rice

**Signature of Reporting Person 10/02/2018

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 sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on August 14, 2018.

The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$17.35 to \$17.75, inclusive. The reporting person undertakes to provide to the registrant, any security holder of the registrant, or the staff of the

- (2) Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range.
- Option vested as to 13,661 shares on February 27, 2010, and vested as to one thirty-sixth of the remaining balance of 40,981 shares on the 27th day of each of the ensuing 36 months

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.