SCHAFFER MICHAEL I

Form 4 May 29, 2013

FORM 4

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

OMB Number: 3235-0287

Estimated average

OMB APPROVAL

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005

Form 4 or Form 5 obligations may continue.

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

burden hours per response... 0.5

See Instruction 1(b).

Value

(Print or Type Responses)

| 1. Name and Address of Reporting Person * SCHAFFER MICHAEL I | | Symbol | er Name and Ticker on | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | |
|--|---|---------------|---|----------------|---|---|------------|--|--|
| (Last) | | | of Earliest Transaction Day/Year) | | Director | 10% | Owner | | |
| | HEMEDICS TION, 125 NAG | 05/28/2 OG | 2013 | | _X_ Officer (giv below) VP of La | below) aboratory Operat | r (specify | | |
| | (Street) | | endment, Date Origina onth/Day/Year) | al | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | | |
| ACTON, M | A 01720 | | | | Form filed by l Person | More than One Rep | porting | | |
| (City) | (State) | (Zip) Tak | ole I - Non-Derivative | Securities Acq | uired, Disposed o | of, or Beneficiall | ly Owned | | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if any (Month/Day/Year) | | Transaction(A) or D Code (Instr. 3, | (A) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| Common Stock, \$.005 Par Value | 05/28/2013 | | Code V Amount | ` / | (Instr. 3 and 4) | D | | | |
| Common Stock, \$.005 Par | 05/28/2013 | | F 779 | D \$ 11.47 | 37,945 | D | | | |

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

Edgar Filing: SCHAFFER MICHAEL I - Form 4

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.

SEC 1474 (9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of | 2. | 3. Transaction Date | | 4. | 5. | 6. Date Exerc | | 7. Title | | 8. Price of | 9. Nu |
|-------------|-------------|---------------------|--------------------|-------------|------------|-----------------|--------------|-----------|----------|-------------|---------|
| Derivative | Conversion | (Month/Day/Year) | Execution Date, if | Transaction | orNumber | Expiration D | ate | Amoun | it of | Derivative | Deriv |
| Security | or Exercise | | any | Code | of | (Month/Day/ | Year) | Underl | ying | Security | Secui |
| (Instr. 3) | Price of | | (Month/Day/Year) | (Instr. 8) | Derivative | e | | Securit | ies | (Instr. 5) | Bene |
| | Derivative | | • | , , | Securities | | | (Instr. 3 | 3 and 4) | , | Owne |
| | Security | | | | Acquired | | | | | | Follo |
| | | | | | (A) or | | | | | | Repo |
| | | | | | Disposed | | | | | | Trans |
| | | | | | of (D) | | | | | | (Instr |
| | | | | | (Instr. 3, | | | | | | (IIIsti |
| | | | | | 4, and 5) | | | | | | |
| | | | | | 4, and 3) | | | | | | |
| | | | | | | | | | Amount | | |
| | | | | | | Data | Evaluation | | or | | |
| | | | | | | Date Expiration | Title Number | | | | |
| | | | | | | Exercisable | Date | (| of | | |
| | | | | Code V | (A) (D) | | | | Shares | | |

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

SCHAFFER MICHAEL I C/O PSYCHEMEDICS CORPORATION 125 NAGOG PARK ACTON, MA 01720

VP of Laboratory Operations

Signatures

Patrick J. Kinney, Jr. as attorney-in-fact for Michael I. Schaffer

05/29/2013

**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).

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.

Reporting Owners 2