Edgar Filing: PAYNE BARBARA A - Form 4

PAYNE BAR Form 4 July 30, 2018	BARA A										
FORM 4 UNITED STATES SECU W Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue				JRITIES AND EXCHANGE COMMISSI Jashington, D.C. 20549 ANGES IN BENEFICIAL OWNERSHIP (SECURITIES 16(a) of the Securities Exchange Act of 193 Utility Holding Company Act of 1935 or Sec Investment Company Act of 1940					F Estimated average burden hours per response 3235-0287 January 31, 2005 Estimated average burden hours per response 0.5		
(Print or Type Ro 1. Name and Ac PAYNE BAI	Idress of Reportin	g Person <u>*</u>	2. Issuer Symbol	Name and '	Ticker or 7	Fradin	g	5. Relationship of Issuer	f Reporting Per	son(s) to	
			UTAH MEDICAL PRODUCTS INC [UTMD]				S INC	C (Check all applicable)			
(Month/D 07/27/20 (Street) 4. If Amer			3. Date of (Month/Da 07/27/20	-				X_ Director10% Owner Officer (give titleOther (specify below)below)			
			endment, Date Original onth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	Securit	ties Aco	quired, Disposed o	f, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	ar) Executio any	emed on Date, if Day/Year)	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3,	l (A) o l of (D 4 and (A) or)	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 Stock	07/27/2018			S	1,500	D		24,932	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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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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. Transacti Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Addr	ess.	Relationships							
	Director	10% Owner	Officer	Other					
PAYNE BARBARA A									
	Х								
Signatures /s/ Barbara A.	07/30/2018								
Payne	0//30/2018								

<u>**</u>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.