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						
esponse	0.5					

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

(Drint or Tyme Permanese)		riieu puisuaiii to	section ro(a) o	i ilie secui	ittles Exci	nange Act of	1934 01 3	section	1 30(II) 0	i the inves	ument	Company Act of 1940					
(Print or Type Responses) 1. Name and Address of Reporting Person *- Radin Arthur J				2. Issuer Name and Ticker or Trading Symbol REPRO MED SYSTEMS INC [REPR]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
200 HICKS STREET	(First)		(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 03/29/2019				X Director 10% Owner Officer (give title below) Other (specify below)									
(Street) BROOKLYN, NY 11201			4. If Amendment, Date Original Filed(Month/Day/Year) 04/02/2019						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)				Tab	le I - No	on-Deriva	itive Securit	ies Acqu	quired, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3)			2. Transacti (Month/Day	/Year) Exe				Dis	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			Ownership	Beneficial Ownership	
						Cod	le V	/ A	mount	(A) or (D)	Price				(I) (Instr. 4)		
Common Stock			03/29/201	19		A		4,6	688 A	4	\$ 1.6	341,149			D		
Reminder: Report on a separat	ate line for each clas	ss of securities benefic		ole II - Der	ivative S	ecurities Ac	required, D	red to i	respond ed of, or	unless the Beneficia	form di	of information contained in splays a currently valid OMB ned			SEC	1474 (9-02	
Title of Derivative	2. Conversion or	3. Transaction Date	3A. Deemed		tion Code	5. Number of I				rcisable and		and Amount of Underlying	8. Price of	9. Number of	10.	11. Nature	
Security (Instr. 3)	Derivative any		Execution Date, if any (Month/Day/Year)	f (Instr. 8) Seco		Disposed of (I	ecurities Acquired (A) or Disposed of (D) Instr. 3, 4, and 5)		Expiration Date (Month/Day/Year)		Securities (Instr. 3 and 4)		Derivative Security Security (Instr. 5) Be	Derivative Securities Beneficially Owned Following	rrities Form of Derivative Security:	of Indirect Beneficial Ownership (Instr. 4)	
				Code	V	(A)	(D)		ate xercisable	Expiration Date	Title	Amount or Number of Shares		Reported Transaction(s) (Instr. 4)	or Indirect (I) (Instr. 4)		

Reporting Owners

D	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Radin Arthur J 200 HICKS STREET BROOKLYN, NY 11201	X						

Signatures

/s/ Arthur J. Radin	04/02/2019				
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).

Remarks:
The filing of this statement shall not be construed as an admission (a) that the person filing this statement is, for the purposes of Section 16 of the Securities Exchange Act of 1934, as amended, the beneficial owner of any ex

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.