### FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

wasnin	igton,	D.C.	20549

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

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

# Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

Instruc	tion 1(b).			File							npany Act			34						
1. Name and Address of Reporting Person*  WALLER GREGORY D						2. Issuer Name <b>and</b> Ticker or Trading Symbol CHF Solutions, Inc. [ CHFS ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
															X Direct	or		10% O	wner	
(Last) (First) (Middle) 12988 VALLEY VIEW ROAD						3. Date of Earliest Transaction (Month/Day/Year) 06/02/2017									Office below	(give title		Other ( below)	specify	
					4. If	Ame	ndment,	Date (	of Origin	al Filed	d (Month/D	ay/Ye	ar)	6. 1	ndividual or	Joint/Group	o Filing	g (Check Ap	plicable	
(Street) EDEN PRAIRIE MN 55344														- 1	Line)  X Form filed by One Reporting Person  Form filed by More than One Reporting					
(City)	(S	tate)	(Zip)												Perso	n				
		Tab	le I - Nor	า-Deriv	ative	Se	curitie	s Ac	quired	, Dis	posed o	of, o	r Ben	eficial	ly Owne	d				
1. Title of Security (Instr. 3)  2. Transa Date (Month/D				ar)   E	2A. Deemed Execution Date, if any (Month/Day/Year)		Code	Transaction Dispose Code (Instr. 5)		ities Acquired (A) d Of (D) (Instr. 3, 4			Benefic Owned	ies Fo cially (D Following (I)		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
										v	Amount (A) or (D)		Price	Transac	Reported Transaction(s) (Instr. 3 and 4)			(111341. 4)		
		7	able II -								osed of converti				Owned					
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. Transaction Code (Instr. 8)		of		6. Date Exercisa Expiration Date (Month/Day/Year		•	Amo Sec Und Deri	7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactie (Instr. 4)	s Blly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)		Date Exercisa		Expiration Date	Title		Amount or Number of Shares						

## Explanation of Responses:

\$0.57

Non-Qualified Stock Option

(right to buy)

1. Vests in 12 approximately equal consecutive monthly increments, commencing on the one-month anniversary of the date of grant, so that all of the options will be vested on the one-year anniversary of the date of grant.

(1)

06/01/2027

<u>Gayle C. Aiken, by Power of Attorney</u>

8,000

Stock

\$<mark>0</mark>

06/06/2017

8,000

D

\*\* Signature of Reporting Person

Date

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

 $^{\star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

06/02/2017

\*\* 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.

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 Number.

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