FORM 4

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

OMB APP	ROVAL
OMB Number:	3235-0287
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	es)															
1. Name and Address of Reporting Person * Angold Russ				2. Issuer Name and Ticker or Trading Symbol EKSO BIONICS HOLDINGS, INC. [EKSO]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle) C/O EKSO BIONICS HOLDINGS, INC., 1414 HARBOUR WAY SOUTH, SUITE 1201				3. Date of Earliest Transaction (Month/Day/Year) 08/23/2017								X Officer (give title below) Other (specify below) President, EksoWorks					
(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 Form filed by More than One Reporting Person					
(City	OND, CA 9	(State)	(5	Zip)													
		(State)					Tabl								Beneficially	Owned	
1.Title of Security (Instr. 3) 2. Transa Date (Month/L		action Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)					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)			\ /	7. Nature of Indirect Beneficial Ownership		
								Code	V	Amoun	(A) or (D)	Price	or Indirec (I) (Instr. 4)			(I)	(Instr. 4)
Common	Stock		08/23/2	2017				S		9,352	D	\$ 1.33	241,326			D	
Reminder: indirectly.	Report on a	separate line fo	or each cl	ass of secu	irities be	eneficia	ally ov	wned dire	Pers	ons wh	this fo	rm ar	e not req	uired to re	nformation espond un ntrol numb	less	EC 1474 (9- 02)
			Т	able II - D				-		sposed o			•	l			
1. Title of Derivative Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/Y	Execur Year) any		ite, if T	(Instr. 8)			and e (Mo	ate Exerc Expirationth/Day/	on Date	Am Un Sec	Citle and count of derlying urities str. 3 and		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersl Form of Derivati Security Direct (I or Indire	Beneficia Ownershi (Instr. 4)
						Code	V	(A) (D)		e :	Expiratio Date	on Title	Amount or Number of Shares				
Repor	ting O	wners															
'n	Concreting O	wnor Name /	Addross			Relationships											
Ь	Reporting Owner Name / Address				Director 10% Owner			er Offic	Officer			Other					
	O BIONIC	CS HOLDIN						Pre	siden	t, EksoV	Vorks						

Signatures

RICHMOND, CA 94804

Erin M. Anderman, as Attorney-in-Fact	08/25/2017			
**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.