| FORM 4  |                |
|---|----------------|
| ☐ Check this box if no longer<br>subject to Section 16. Form<br>Form 5 obligations may con<br>See Instruction 1(b). | 4 or<br>tinue. |

(Print or Type Responses)

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

| OMB APPROVAL     |            |  |  |  |  |  |  |  |  |  |
|------------------|------------|--|--|--|--|--|--|--|--|--|
| OMB Number:      | 3235-0287  |  |  |  |  |  |  |  |  |  |
| Estimated avera  | age burden |  |  |  |  |  |  |  |  |  |
| hours per respoi | nse 0.5    |  |  |  |  |  |  |  |  |  |

## 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

| 1. Name and Address of R<br>Soran Andrei | 2. Issuer Name and Ticker or Trading Symbol<br>MICRON SOLUTIONS INC /DE/ MICR |          |  |                          |      |   |        | 5. Relationship of Reporting Person(s) to Issuer<br>(Check all applicable) |   |  |  |                 |  |
|--|---|----------|--|--------------------------|------|---|--------|--|---|--|--|-----------------|--|
|  |   |          |  |                          |      |   |        |  | Director  | 10% 0  | Owner  |                 |  |
| (Last)<br>28 LOTHROP STREET              | (First)   | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year)<br>12/13/2017   |                          |      |   |        |  |   | Officer (give Other (specify below)            |  |                 |  |
| NEWTON MA 02460                          | (Street)  |          | 4. If Amendment, Date Original Filed (Month/Day/Year)  |                          |      |   |        | <u> </u>   | 6. Individual or Joint/Group Filing (Check Applicable Line)<br><u>x</u> Form filed by One Reporting Person<br>—Form filed by More than One Reporting Person |  |  |                 |  |
| (City)                                   | (State)   | (Zip)    | Table I Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned   |                          |      |   |        |  |   |  |  |                 |  |
| 1. Title of Security<br>(Instr. 3)       |   |          | 2. Trans-<br>action2A.<br>Deemed3. Trans-<br>action4. Securities Acquired (A)<br>or Disposed of (D)<br>(Instr. 3, 4 and 5)Date, if<br>anyany |                          |      |   |        | (A)  | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following  | 6. Owner-<br>ship<br>Form:<br>Direct<br>(D) or | 7. Nature of<br>Indirect<br>Beneficial<br>Owner-<br>ship |                 |  |
|  |   |          | (Month/<br>Day/<br>Year)   | (Month/<br>Day/<br>Year) | Code | V | Amount | (A)<br>or<br>(D)   | Price   | Reported<br>Transaction(s)<br>(Instr. 3 and 4) | Indirect<br>(I)<br>(Instr. 4)                            | (Instr. 4)      |  |
| Common Stock                             |   |          | 12/13/<br>2017   | 12/13/<br>2017           | A    |   | 13,512 | A  | \$3.4966  | 100,000  | I (1)  | Andrei<br>Soran |  |
|  |   |          |  |                          |      |   |        |  |   |  |  | Trust           |  |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. \* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

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.

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## FORM 4 (continued)

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

| 1. Title of Derivative<br>Security<br>(Instr. 3) | 2. Conver-<br>sion or<br>Exercise<br>Price of<br>Deri-<br>vative<br>Security | action | Deemed<br>Exec-<br>ution<br>Date, if<br>any<br>(Month/<br>Day/ | Cod  | on | 5. Number of Deriv-<br>ative Securities Ac-<br>quired (A) or Dis-<br>posed of (D)<br>(Instr. 3, 4, and 5) |     | <ul> <li>6. Date Exercisable and Expiration Date (Month/Day/Year)</li> <li>7. Title and Amount of Underlying Securities (Instr. 3 and 4)</li> </ul> |                         | of<br>Deriv-<br>ative<br>Secur-<br>ity<br>(Instr.<br>5) | 9.<br>Number<br>of deriv-<br>ative<br>Secur-<br>ities<br>Bene-<br>ficially<br>Owned | 10.<br>Owner-<br>ship<br>Form of<br>Deriv-<br>ative<br>Security:<br>Direct<br>(D) or | 11.<br>Nature<br>of<br>Indirect<br>Benefi-<br>cial<br>Ownership<br>(Instr. 4) |                               |  |
|--|--|--------|--|------|----|---|-----|---|-------------------------|---|---|--|---|-------------------------------|--|
|  |  |        | Year)  | Code | V  | (A)   | (D) | Date<br>Exer-<br>cisable  | Expira-<br>tion<br>Date | Title   | Amount or<br>Number of<br>Shares  |  | Follow-<br>ing<br>Reported<br>Trans-<br>action(s)<br>(Instr. 4)               | Indirect<br>(I)<br>(Instr. 4) |  |

Explanation of Responses:

See attached "FOOTNOTES" page.

- \*\* 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.

Derek T. Welch, attorney-in-fact \*\* Signature of Reporting Person 12/15/2017

1 Shares held in the Andrei Soran Trust for which Mr.Soran serves as Trustee.