FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

| <i>N</i> ashington, D. | C. 20549 |  |
|------------------------|----------|--|
|------------------------|----------|--|

| <b>STATEMENT</b> | <b>OF CHANGES</b> | IN BENEFICIAL | <b>OWNERSHIP</b> |
|------------------|-------------------|---------------|------------------|
|                  |                   |               |                  |

|    | OMB APPROVAL             |     |  |  |  |  |  |  |  |
|----|--------------------------|-----|--|--|--|--|--|--|--|
| li | 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 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* <u>Gemignani Gary G</u> |  |  |  | 2. Issuer Name and Ticker or Trading Symbol Bluejay Diagnostics, Inc. [ BJDX ] |   |                               |  |                     | (Ch                     | elationship of eck all applications of the contractions of the con | able)  | . ,  | Sissuer 6 Owner                               |                        |                    |  |
|--|--|--|--|--|---|-------------------------------|--|---------------------|-------------------------|--|--|--|---|------------------------|--------------------|--|
| (Last)   | `  | rst)<br>.GNOSTICS, IN                      | (Middle)   |  | 3. Date of Earliest Transaction (Month/Day/Year) 12/15/2021 |                               |  |                     |                         |  |  | Officer<br>below)  | (give title                                   | Oth<br>bel             | er (specify<br>ow) |  |
| 360 MASSACHUSETTS AVENUE, SUITE 203                              |  |  |  | 4.   | If Amendment, Date of Original Filed (Month/Day/Year)       |                               |  |                     |                         |  | 6. Individual or Joint/Group Filing (Check Applicable Line)  |  |   |                        |                    |  |
| (Street) ACTON   | M  | A  | 01720  |  |   |                               |  |                     |                         |  |  | X Form fi  | led by More                                   | Reporting Pethan One R |                    |  |
| (City)   | (S   | tate)                                      | (Zip)  |  |   |                               |  |                     |                         |  |  |  |   |                        |                    |  |
|  | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned   |  |  |  |   |                               |  |                     |                         |  |  |  |   |                        |                    |  |
| Dat  |  | Date                                       |  | action 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year)             |   | Code (Inst                    | Transaction Code (Instr. 5)  Disposed Of (D) (Instr. 3, 4  |                     |                         | 5. Amour<br>Securitie<br>Beneficia<br>Owned F<br>Reported  | es Fe<br>ally (E<br>Following (I   | 6. Ownership<br>Form: Direct<br>(D) or Indirec<br>(I) (Instr. 4) | of Indirect                                   |                        |                    |  |
|  |  |  |  |  | Code V  | Amount                        | (A) or<br>(D)  | Price               | Transact<br>(Instr. 3 a | ion(s)   |  | (iiisti. 4)  |   |                        |                    |  |
|  | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |  |  |  |   |                               |  |                     |                         |  |  |  |   |                        |                    |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)              | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security  | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year | Code (Instr.   Derivative  |   | ve<br>es<br>ed<br>ed<br>nstr. | 6. Date Exercisable and Expiration Date (Month/Day/Year)  (Month/Day/Year)  Title and Am of Securities Underlying Derivative Sect (Instr. 3 and 4) |                     | ies<br>g<br>Security    | 8. Price of<br>Derivative<br>Security<br>(Instr. 5)  | 9. Number<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction<br>(Instr. 4) | Owner<br>Form:<br>Direct<br>or Indi<br>(I) (Ins                  | Beneficial<br>(D) Ownership<br>ect (Instr. 4) |                        |                    |  |
|  |  |  |  | Code   | v   | (A)                           | (D)  | Date<br>Exercisable | Expiration<br>Date      | Title  | Amount<br>or<br>Number<br>of<br>Shares   |  |   |                        |                    |  |
| Option to<br>purchase<br>common<br>stock                         | \$2.72   | 12/15/2021                                 |  | A  |   | 25,000                        |  | (1)                 | 12/15/2031              | Common<br>Stock  | 25,000   | (2)  | 25,000  | D                      |                    |  |

## **Explanation of Responses:**

- 1. The stock options set forth in this table vest on the one-year anniversary of the date hereof, subject to the grantee's continued service to the Company on the vesting date.
- $2. \ The \ stock \ options \ were \ is sued \ in \ connection \ with \ the \ reporting \ person's \ Board \ of \ Director \ services \ to \ the \ Company.$

/s/ Gary Gemignani 12/16/2021

\*\* Signature of Reporting Person

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).
- \*\* 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.