FORM 4

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

OMB APPROVAL								
DMB Number:	3235-0287							
Estimated average burden nours per response 0.5								
ours per response								

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)														
Name and Address of Reporting Person * Umscheid Marc				2. Issuer Name and Ticker or Trading Symbol Sonoma Pharmaceuticals, Inc. [SNOA]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
(Last) (First) (Middle) C/O SONOMA PHARMACEUTICALS, 1129 NORTH MCDOWELL BLVD. (Street)					Date of Earliest Transaction (Month/Day/Year) 03/06/2017 4. If Amendment, Date Original Filed(Month/Day/Year)						X Officer (give title below) Other (specify below) Chief Strategy/Mkt Officer					
											6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
PETALUMA, CA 94954																
(City	·)	(State)	(Zi	p)		Tabl	le I - Nor	-Deri	vative Se	ecuriti	es Acqu	ired, Disp	osed of, or l	Beneficially	Owned	
1.Title of Security (Instr. 3)		2. Transac Date (Month/D	ay/Year)	2A. Deemed Execution Date, any (Month/Day/Yea		e, if Code (Instr. 8)		1 4. Securities Acqu (A) or Disposed o (D) (Instr. 3, 4 and 5)		Benefic Reporte (Instr. 3		ount of Securities cially Owned Following ed Transaction(s) 3 and 4)		6. Ownership Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
							Code	V	Amount	(A) o (D)	r Price				(I) (Instr. 4)	
Common \$0.0001 p	Stock, par per share	value	03/06/20	017			P		750	A	\$ 6.82	750			D	
Reminder:	Report on a	separate line f	or each cla	ss of secu	rities beneficia	ılly o	wned dire	ectly o	r							
Security (Instr. 3)	Conversion	3. Transactio Date (Month/Day/	on 3A. Deemed Execution Date any		Derivative Securi (e.g., puts, calls, w 4. ate, if Transaction Code (Year) (Instr. 8)		ities Acquired warrants, optic 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		tions, convertible 6. Date Exercisal and Expiration D (Month/Day/Yea		eneficia curities 7. 7 Anr Un Sec (In: 4)	re not req ently valid ally Owned	8. Price of Derivative Security (Instr. 5)	espond unl	of 10. Owners Form of Derivati Security Direct (or Indire	Owners (Instr. 4) (D)
					Code	V	(A) (D)	Exe	rcisable	Date	110	of Shares				
Repor	ting O	wners														
						Re	lationshi	ps								
Reporting Owner Name / Address Directo			r 10% Owner Officer				Other									
Umscheid Marc C/O SONOMA PHARMACEUTICALS 1129 NORTH MCDOWELL BLVD. PETALUMA, CA 94954					Chief Strategy/Mkt Officer											
Signat	tures															

Explanation of Responses:

/s/ Robert Miller as attorney-in-fact

**Signature of Reporting Person

- * 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.

03/08/2017

Date

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.