FORM 4

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

OMB APPROVAL						
DMB Number:	3235-0287					
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ours per respon	se 0.5					

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 * Miller Robert E			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, INC., 1129 N. MCDOWELL BLVD.					3. Date of Earliest Transaction (Month/Day/Year) 03/12/2018						X Officer (give title below) Other (specify below) Chief Financial Officer					
(Street) PETALUMA, CA 94954			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	·)	(State)	((Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											
1.Title of S (Instr. 3)	Security		2. Transa Date (Month/I	action Day/Year)	Execu any	Aonth/Day/Year) (A) or		of (D)	Reported Transaction(s) (Instr. 3 and 4)			6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial			
Common value per	Stock, \$0. share	0001 par	03/12/2	018			P		1,200	A	\$ 4.03	17,668			I	See Note
Common value per	Stock, \$0. share	0001 par	03/13/2	018			Р		1,200	A	\$ 4.0996	18,868			I	See Note
Common value per	Stock, \$0. share	0001 par										20,088			D	
Reminder: indirectly.	Report on a	separate line	for each c	lass of sec	urities	beneficially	owned dire									
Persons who respond to the collection of information SEC 1474 (9-contained in this form are not required to respond unless 02) the form displays a currently valid OMB control number.																
			Т			tive Securit uts, calls, wa							l			
1. Title of Derivative Conversion Security (Instr. 3) Price of Derivative Security		3. Transaction Date (Month/Day)	/Year) Ex	Execution D		Code	of	and Expiration Date (Month/Day/Year) U S (I		Am Und Sec	itle and ount of derlying urities tr. 3 and		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersh Form of Derivativ Security: Direct (I or Indire	Ownershi (Instr. 4) D)	
						Code V	(A) (D)	Da Exc	te ercisable	Expirat Date	ion Titl	Amount or Number of Shares				
Reporting Owners																
							Relatio	nshi	ps			Ī				
R	eporting Ov	vner Name /	Address	-	n:	100/ 5	0.00		•		0.1					

Director 10% Owner Officer

Other

Chief Financial Officer

Signatures

Miller Robert E

/s/ Robert E. Miller	03/14/2018
**Signature of Reporting Person	Date

C/O SONOMA PHARMACEUTICALS, INC.

1129 N. MCDOWELL BLVD. PETALUMA, CA 94954

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).
- (1) These shares are owned by Mr. Miller as trustee for The Miller 2005 Grandchildren's Trust, for which Mr. Miller and his wife, Margaret I. Miller, are the trustees.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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