FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D	.C. 20549
---------------	-----------

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average burden										
hours per response	e: 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* TURK JAMES C JR					2. Issuer Name and Ticker or Trading Symbol AquaBounty Technologies, Inc. [AQB]									(Che	eck all app	tionship of Reporti all applicable) Director Officer (give title		10% Ov	wner
(Last)	(Fii UABOUNT	rst) (M TY TECHNOLO	Middle) GIES, I	NC.		te of E 7/202		t Transa	action (M	/lonth/	Day/Year)				below		le Other (spe below)		вреспу
2 MILL & MAIN PLACE, SUITE 395						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable				
(Street) MAYNARD MA 01754															X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(St	ate) (Z	Zip)																
		Table	I - Nor	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	3ene	ficia	lly Own	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Date				Execution Date,		Date,	Transaction Disposed (Code (Instr. 5)		ies Acquired (A Of (D) (Instr. 3,			Benefic	ies cially Following	6. Owner Form: Di (D) or Ind (I) (Instr.	rect lirect 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
										v	Amount	(A) or (D) P		Price		ction(s)			(111301. 4)
Common Stock 12/17/2					2020			J ⁽¹⁾		462	1	A	\$ <mark>0</mark>	17	7,426				
Common Stock 12/17/2				/2020				J ⁽²⁾		3 A		4	\$ <mark>0</mark>	17,429		D			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	tive Conversion Date Execution Date, or Exercise (Month/Day/Year) if any		4. Transaction Code (Instr. 8)		of Deriv	vative irities ired r osed)	6. Date Exercisa Expiration Date (Month/Day/Yea		te	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		str.	3. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Owi For Dire or li (I) (I	nership m: ect (D) ndirect nstr. 4)	Beneficial Ownership (Instr. 4)		
					Code V		(A)		Date Exercisable		Expiration Date	Title	Numb of						
Explanation	n of Respons	ses:																	

- 1. On December 17, 2020, NRM VI Holdings I, LLC made a liquidating distribution of its assets in connection with the dissolution of the fund in accordance with the terms of its Limited Liability Company Agreement. In connection with this dissolution, the number of indicated shares was received by the Reporting Person in his capacity as a limited partner of the fund.
- 2. On December 17, 2020, NRM VII Holdings I, LLC made a liquidating distribution of its assets in connection with the dissolution of the fund in accordance with the terms of its Limited Liability Company Agreement. In connection with this dissolution, the number of indicated shares was received by the Reporting Person in his capacity as a limited partner of the fund.

Remarks:

/s/ David A. Frank, Name: David A. Frank, attorney-in-

12/21/2020

fact

** Signature of Reporting Person Date

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.