FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

Vashington, [D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
OMB Number: 3235-0287							
Estimated average burden							
hours per response:	0.5						

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Name and Address of Reporting Person* Jaramillo Nestor Jr.					2. Issuer Name and Ticker or Trading Symbol CHF Solutions, Inc. CHFS									Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner							
Jaranni	10 1 10510	71 31.													Directo	or (give title		10% O			
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year)									below)		below)		pecity		
` '		IEW ROAD	(ivildule)		01	01/22/2021								C	hief Exec	utive	Officer				
12900 VI	ALLEI V	IEW KOAD																			
(Ctroot)					4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)	RAIRIE I	MN	55344											1 3		iled by One	Repo	orting Perso	n		
LDLIVI	ICTITCIE :	VIIV	33344											1	_	•		One Repo			
(City)		State)	(Zip)												Persor						
(Oity)		Oldic)	(Σιρ)																		
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transa				action		2A. Deem		3. 4. Securities Acquired (A)					(A) or	5. Amou Securitie			nership	7. Nature of Indirect			
Date (Month/I					Day/Ye	ear)	Execution Date, if any (Month/Day/Year		Code (Instr. 5)			sed Of (D) (Instr. 3,		3, 4 and	Benefici	eneficially		r Indirect	Beneficial Ownership (Instr. 4)		
												Owned F Reported	ı ĭ	(I) (In	str. 4)						
										v	Amount (A) or (D)		Price	Transaction(s) (Instr. 3 and 4)							
			Table II	Doriva	tivo	Soc	uritine	Λοαι	uirod D	ien	seed of	or Bo	ofi	cially	Ownod						
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
1. Title of	2.	3. Transaction	3A. Deemed	4 4			5. Numb	ner	6. Date Ex	ercis	ahle and	7. Title a	nd A	mount	8. Price of	9. Number	r of	10.	11. Nature		
Derivative Security	Conversion or Exercise	Date	Execution I	Date, T	ransaction ode (Instr		on of		Expiration Date of Securities					Derivative Security	derivative	Ownersh	Ownership				
(Instr. 3)	Price of	(WOIIII/Day/Tear)	(Month/Day			ilisti.	Securities		(Month/Day/Year) Underlying Derivative Sec					(Instr. 5)	Beneficial		Direct (D)	Ownership			
	Derivative Security						Acquired (A) or		(Instr. 3 and 4)					⁴⁾		Owned Following		or Indirect (I) (Instr. 4)	(Instr. 4)		
							Disposed of (D) (Instr.									Reported Transaction(s)					
				L			3, 4 and 5)									(Instr. 4)					
													A	mount r							
									Date		xpiration			umber							
					ode	v	(A)	(D)	Exercisab		ate	Title		hares							
Incentive Stock	\$9.3	01/22/2021			Δ		12.750		(1)		01/21/2031	Commo	1 1	2.750	\$0	12.750		D			

Explanation of Responses:

1. 1. The options will vest as follows: 25% of the options will vest on the one-year anniversary of the date of grant; the remaining options will vest in 36 equal consecutive monthly increments thereafter, so all will be vested on the four-year anniversary of the date of grant.

/s/ Claudia Drayton, by Power of Attorney

01/26/2021

** 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.