

SECURITIES & EXCHANGE COMMISSION EDGAR FILING

Social Life Network, Inc.

Form: 3/A

Date Filed: 2019-02-11

Corporate Issuer CIK: 1281984

© Copyright 2019, Issuer Direct Corporation. All Right Reserved. Distribution of this document is strictly prohibited, subject to the terms of use.

FORM 3

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

OMB APPROVAL				
OMB Number:	3235-0104			
marker and account to the second	la account			

per response..

0.5

INITIAL STATEMENT OF 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 Type Responses)							
Name and Address of Reporting Person [*] DiSiena Mark	Date of Event Requiring Statement (Month/Day/Year)		t 3. Issuer Name and Ticker or Trading Symbol Social Life Network, Inc. [WDLF]				
(Last) (First) (Middle) 8100 EAST UNION AVENUE	02/06/2019			eporting Person(s) to k all applicable)	Filed(Month	5. If Amendment, Date Original Filed(Month/Day/Year) 11/01/2018	
(Street) DENVER, CO 80237					CFO & CAO 6. Individual or Joint/Group Filing(Line)		
(City) (State) (Zip)		Tabl	e I - Non-Deriva	tive Securities	Beneficially Ow	rned	
1.Title of Security (Instr. 4)		2. Amount of Securities Beneficially Owned (Instr. 4)			4. Nature of Indirect (Instr. 5)	Beneficial Ownership	
Common Stock 1,000,000				D			
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 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 control number.							
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)							
Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Date (Instr. 4) Expiration Title Amount or Num Exercisable Date		tive Security	Exercise Price of	of Derivative Security: Direct (D) or Indirect (I)	Nature of Indirect Beneficial Ownership (Instr. 5)	
Dan autin u Ouwana	Exercisable Date	The puriodity of the	difficor of offares		(Instr. 5)		

Reporting Owners

Reporting Owner Name / Address	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
DiSiena Mark 8100 EAST UNION AVENUE DENVER, CO 80237			CFO & CAO		

Signatures

/s/ Mark DiSiena, CFO	02/11/2019
-Signature of Reporting Person	Date

Explanation of Responses:

- * $\,$ If the form is filed by more than one reporting person, see Instruction 5(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).

Remarks:

Amendment to clarify ownership of reporting person being The Living Trust of Mark DiSiena and update the total number of shares issued as of 2/6/2019

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

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.

FORM 3

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

OMB APPR	OMB APPROVAL				
OMB Number: 3235-0104					
Estimated average but	rden hours				
per response	0.5				

INITIAL STATEMENT OF 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 Type Responses)									
Name and Address of DiSiena Mark	Reporting Person-	(1)	Date of Event Requiring Statement (Month/Day/Year)			Issuer Name and Ticker or Trading Symbol Social Life Network, Inc. [WDLF]				
8100 EAST UNION	(First) (Mid AVENUE	ldle)	02/06/2019			4. Relationship of R (Chec Director X Officer (give title be	k all applicable)	Filed(Month	5. If Amendment, Date Original Filed(Month/Day/Year) 11/01/2018	
DENVER, CO 8023	(Street)						CFO & CAO	6. Individu Line) _X_ Form file	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) (Zi	ip)			Tabl	e I - Non-Deriva	tive Securities	Beneficially Ow	ned	
1.Title of Security (Instr. 4)			2. Amount of Securit Owned (Instr. 4)				3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	Nature of Indirect Beneficial Ownership (Instr. 5)		
Common Stock					1,000,000		D			
Reminder: Report on a se	eparate line for each clas	s of securitie	es benefici	ally owne	ed directly or indirec	etly.			SEC 1473	(7-02)
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 control number.							(-)			
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)										
1. Title of Derivative Secu (Instr. 4)	ırity	and	2. Date Exercisable and Expiration Date (Month/Day/Year) 3. Title and Amour Underlying Derivat (Instr. 4)				· ·	Nature of Indirect Beneficial Ownership (Instr. 5)		
		Dat Exe	te E ercisable [Expiration Date	Title Amount or N	lumber of Shares		or Indirect (I) (Instr. 5)		

Reporting Owners

Reporting Owner Name / Address	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
DiSiena Mark 8100 EAST UNION AVENUE DENVER, CO 80237			CFO & CAO		

Signatures

/s/ Mark DiSiena, CFO	02/11/2019
-Signature of Reporting Person	Date

Explanation of Responses:

- * $\,$ If the form is filed by more than one reporting person, see Instruction 5(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).

Remarks:

Amendment to clarify ownership of reporting person being The Living Trust of Mark DiSiena and update the total number of shares issued as of 2/6/2019

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

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.