SEC Form 3

FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL

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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

2. Date of Event Requiring Statement (Month/Day/Year) 09/09/2016 3. Issuer Name and Ticker <u>BioScrip, Inc.</u> [BIO					
	Relationship of Reporting Perso heck all applicable) Director	10% Owner Other (specify		5. If Amendment, Date of Original Filed (Month/Day/Year)	
:	X Officer (give title below)			6. Individual or Joint/Group Filing (Check Applicable Line)	
	Senior Vice Presi	ident			y One Reporting Person y More than One erson
Table I - Non-Derivative Securities Beneficially Owned					
	eficially Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)	
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)					
			or Exercise	Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
Amount Deri	Derivative Security	ative or Indirect			
	OR-Derivative 2. A Ben Derivative S alls, warrant rcisable and Date (/Year) Expiration	(Check all applicable) Director Vificer (give title below) Senior Vice Press on-Derivative Securities Beneficially Senior Vice Press 2. Amount of Securities Beneficially Beneficially Owned (Instr. 4) Derivative Securities Beneficially Owned (Instr. 4) Senior Vice Press alls, warrants, options, convertible 3. Title and Amount of Security rcisable and Date (/Year) 3. Title and Amount of Security Expiration Securities Derivative Security	(Check all applicable) 0 10% Owne Director 10% Owne X Officer (give title below) Other (spectrostice) Senior Vice President Senior Vice President On-Derivative Securities Beneficially Owned 3. Ownership Beneficially Owned (Instr. 4) Senior Direct (Instr. 5) Derivative Securities Beneficially Owned alls, warrants, options, convertible securities 3. Title and Amount of Securities Inderlying Derivative Security (Instr. 4) Amount or Number of	(Check all applicable) Director 10% Owner (Model) X Officer (give title below) 10% Owner (Model) Senior Vice President 6. I Applicable) 6. I on-Derivative Securities Beneficially Owned 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) 4. Na Derivative Securities Beneficially Owned (Instr. 4) 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) 4. Na Derivative Securities Beneficially Owned alls, warrants, options, convertible securities (Year) 3. Title and Amount of Securities Underlying Derivative Security (Instr. 4) 4. Conversion or Exercise Price of Derivative Security Expiration 3. Title and Amount of Securities Underlying Derivative Security (Instr. 4) 4. Conversion or Exercise Price of Derivative Security	(Check all applicable) Director 10% Owner (Month/Day/Year) Month/Day/Year) Officer (give title below) Other (specify below) 6. Individual or Joint Applicable Line) Senior Vice President Senior Vice President 6. Individual or Joint Applicable Line) Senior Vice President Senior Vice President Form filed berown for the filed berown filed berown filed berown for the filed berown for the filed berown for the filed berown filed berown for the filed berown for the filed berown filed berown for the filed berown for the filed berown for the filed berown for the filed berown filed berown filed berown for the filed berown for the filed berown filed berown for the filed berown filed berown for the filed berown filed berown filed berown for the filed berown

No securities are beneficially owned.

/s/ Alex Schott

** Signature of Reporting Person Date

09/2<u>3/2016</u>

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 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).

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.