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

OMB APPRO	OVAL
OMB Number:	3235-0287
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hours por rosponso	0.5

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

1. Name and Address of Reporting Person *- Jin David				2. Issuer Name and Ticker or Trading Symbol Avalon GloboCare Corp. [AVCO]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director					
(Last) (First) (Middle) C/O AVALON GLOBOCARE CORP., 4400 ROUTE 9, SUITE 3100				3. Date of Earliest Transaction (Month/Day/Year) 02/20/2020							X Officer (give title below) Other (specify below) CEO and President					
(Street) FREEHOLD,, NJ 07728				4. If Amendment, Date Original Filed(Month/Day/Year)						_X_	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person _ Form filed by More than One Reporting Person					
(Cit	ty)	(State)	(Zip)	Table I - Non-Derivative Securities Acq				s Acquired	uired, Disposed of, or Beneficially Owned							
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Y				Date, if		:	4. Securities Acqu (A) or Disposed of (Instr. 3, 4 and 5)		f (D) Ow Tra	5. Amount of Securities Beneficially Owned Following Reported Fransaction(s)) F	Form:	7. Nature of Indirect Beneficial		
				(IVIO	ontn/Da	ay/Year)	Со	ode V	Amount	(A) or (D)	Price	(I)		r Indirect	Ownership (Instr. 4)	
Common	Stock, \$.0	0001 par value									15	450,000		I)	
Reminder:	Report on a	separate line for each	n class of securities b	eneficia	illy ow	ned direc	tly or	Person in this	form are	not re		respond ur		n contained orm displays		1474 (9-02)
1. Title of	·	3. Transaction Date	Table I 3A. Deemed Execution Date, if	I - Deriv (e.g., 4. Transac Code	vative sputs, control of S	Securities calls, war 5. Number Derivative Securities Acquired (or Dispose D)	r of (A)	Person in this	form are ently valid osed of, on onvertible are Date	not re d OMB or Benef	quired to control n icially Own ies)	respond ur umber. ned d Amount ving	8. Price of	9. Number of Derivative Securities Beneficially Owned Following	10. Owners Form of Derivati Security Direct (11. Nation of India Benefic Owners: (Instr. 4
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date	Table I 3A. Deemed Execution Date, if any	I - Deriv (e.g., 4. Transac Code (Instr. 8	vative s puts, c setion E S S (I (I a	Securities calls, war 5. Number Derivative Securities Acquired or Dispose D) Instr. 3, 4 and 5)	s Acq rants of of c.	Person in this a curred, Disp s, options, c. 6. Date Exe Expiration	form are ently valid osed of, on onvertible are Date	e not re d OMB or Benef e securit nd	quired to control nicially Ownies) 7. Title an of Underly Securities	respond ur umber. ned d Amount ving nd 4) Amount or Number	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned	10. Owners Form of Derivati Security Direct (or Indire	11. Nat of India Benefit Owners: (Instr. 4
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date	Table I 3A. Deemed Execution Date, if any	I - Deriv (e.g., 4. Transac Code	vative sputs, control of the state of the st	Securitie calls, war 5. Number Derivative Securities Acquired or Dispose D)	s Acq rants r of ; (A) dd of	Person in this a curre quired, Disp s, options, c 6. Date Exe Expiration (Month/Day	form are ently validated of the convertible of the	e not re d OMB or Benefe e securit and	quired to control n icially Ownies) 7. Title an of Underly Securities ((Instr. 3 an	respond ur umber. ned d Amount ving nd 4) Amount or Number of Shares	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s	Owners: Form of Derivati Security Direct (or Indirect) (I)	11. Nat of Indir Benefic Owners : (Instr. 4

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Jin David C/O AVALON GLOBOCARE CORP. 4400 ROUTE 9, SUITE 3100 FREEHOLD,, NJ 07728	X		CEO and President			

Signatures

/s/ David Jin	02/25/2020
**Signature of Reporting Person	Date

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.
- (1) The stock options vest over one year in equal quarterly installments.

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.