FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
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Check this box if no 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 * Ingargiola Luisa		2. Issuer Name and Ticker or Trading Symbol BioCorRx Inc. [BICX]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director 10% Owner					
(Last) 2390 EAST ORANG AVENUE, SUITE 57		(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 03/29-06:00/2019				Office	er (give title belo	ow)	Other (specify b	pelow)		
ANAHEIM, CA 9280	(Street)		4. If Amendment, Date Original Filed(Month/Day/N			th/Day/Year)		6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person				ble Line)	
,	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		if Cod (Inst		4. Securities A (A) or Dispos (Instr. 3, 4 and		of (D)	Beneficia Reported	Amount of Securities eneficially Owned Following eported Transaction(s)		Ownership Form:	Beneficial
			(Month/Day/Yea		ode	V Amount (A) or (D) Price		(Instr. 3 and 4)			\ /	Ownership (Instr. 4)	
Common Stock, par v \$0.001		03/29- 06:00/2019		A	(1)	1,241	l A	\$ 0	1,241			D	
							-						
			Derivative Secur		c tl quired	ontained ne form di l, Disposed	splays a o	m are currer eficiall	not requ ntly valid	uired to res OMB con	formation spond unle trol numbe	ss	1474 (9-02)
Derivative Conversion D	. Transaction Date Month/Day/Ye	3A. Deemed Execution Date any	Derivative Securing 2.g., puts, calls, volume 4. e, if Transaction Code (Instr. 8)	5.	quired ss, opti	ontained ne form di l, Disposed	of, or Bendantial Securitible Securitible Securitisable in Date	eficiallrities) 7. Ti Amo Unde	not requ ntly valid	OMB con	spond unle	of 10. Ownersi Form of Security Direct (i or Indire	11. Natur of Indire Beneficia Ownersh (Instr. 4)

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Ingargiola Luisa 2390 EAST ORANGEWOOD AVENUE SUITE 575 ANAHEIM, CA 92806	X					

Signatures

/s/ Luisa Ingargiola	04/02-06:00/2019
**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. 78ff(a).
- These shares were issued to Ms. Ingargiola pursuant to a Director Agreement, dated March 1, 2019, by and between BioCorRx Inc. and Ms. Ingargiola. As compensation for her services, Ms. Ingargiola shall be issued, upon the last day of each fiscal quarter, provided Ms. Ingargiola is a member of the Board as of such date, the number of shares of the Company's common stock equivalent to \$5,000 as determined based on the average closing price on the three trading days immediately preceding the last day of such quarter. The average closing price on the three trading days immediately preceding the date of this transaction was \$4.03.

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.