Nelson Kerry Form 3

June 29, 2006									
FORM 3 UNITED STATES SECURITIES AN								OMB APPROVAL	
	Washington, D.C. 20549			OMB Number:	3235-0104				
	Ι	NITIAL S	TATEMENT OF B		OWNERSH	IIP OF	Expires:	January 31,	
	SECURI				TIES			Estimated average burden hours per	
		on 17(a) of	to Section 16(a) of the Public Utility Hot (h) of the Investmen	lding Compa	ny Act of 193		response	0.5	
(Print or Type Resp	ponses)								
1. Name and Address of Reporting Person *2. Date of Event Require Statement Skystone Advisors LLC(Month/Day/Year)			^{1g} 3. Issuer Name and Ticker or Trading Symbol HARVARD BIOSCIENCE INC [HBIO]						
(Last) ((First)	(Middle)	06/26/2006				Amendment, Date Original d(Month/Day/Year)		
TWO INTERNATIONAL PLACE, SUITE 1800,Â			(Chee	(Check all applicable)					
(S BOSTON, M	Street) [AÂ 021]	10		Direct Office (give title bel	erOthe	ow) For ow) For Person X_ F	orm filed by Mor	ble Line) Reporting	
	G (()	(7:)				· ·	ting Person		
(City) (S	State)	(Zip)	Table I	- Non-Deriv	ative Securit	ies Benefici	ally Owned		
1.Title of Security (Instr. 4)				nt of Securities lly Owned	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Ownership (Instr. 5)	Indirect Benefi	cial	
Common Stock	ζ.		3,122,72	28	I <u>(1)</u>	see footno	te 1 (1)		
Reminder: Report of owned directly or i		ate line for ea	ch class of securities bene	eficially	SEC 1473 (7-02	2)			
	inform require	ation conta ed to respo	bond to the collection lined in this form are in nd unless the form dis MB control number.	not					

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

2. Date Exercisable and	3. Title and Amount of	4.	5.	6. Nature of Indirect
Expiration Date	Securities Underlying	Conversion	Ownership	Beneficial Ownership
(Month/Day/Year)	Derivative Security	or Exercise	Form of	(Instr. 5)
	(Instr. 4)	Price of	Derivative	
	Title	Derivative	Security:	
		Security	Direct (D)	
	Expiration Date	(Month/Day/Year) Derivative Security (Instr. 4)	Expiration Date (Month/Day/Year)Securities Underlying Derivative Security (Instr. 4)Conversion 	Expiration Date (Month/Day/Year)Securities Underlying Derivative Security (Instr. 4)Conversion or ExerciseOwnership or ExerciseTitleTitleDerivative Security:Security:

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Date	Expiration	Amount or	or Indirect
Exercisable	Date	Number of	(I)
		Shares	(Instr. 5)

Reporting Owners

Reporting Owner Name / Address		Relationships			
	Director	10% Owner	Officer	Other	
Skystone Advisors LLC TWO INTERNATIONAL PLACE, SUITE 1800 BOSTON, MA 02110	Â	ÂX	Â	Â	
Nelson Kerry C/O SKYSTONE ADVISORS LLC TWO INTERNATIONAL PLACE, SUITE 1800 BOSTON, MA 02110	Â	ÂX	Â	Â	
Signatures					
/s/ Skystone Advisors LLC by Kerry Nelson, Mana Member	aging	06/29/2006			
**Signature of Reporting Person			Date		
/s/ Kerry Nelson	06/29/2006			006	
**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).

Shares reported herein represent shares held by HSO Limited Partnership and HSE Master Fund Limited Partnership. Skystone Advisors LLC is the investment member of the general partner of HSO Limited Partnership and the general partner of HSE Master Fund Limited Partnership. Ms. Nelson is the managing member of Skystone Advisors LLC. Each of Ms. Nelson and Skystone Advisors LLC disclaims

(1) Further ship. Mis. Relison is the managing memoer of oxystone redustors EEC. Each of Mis. Relison and oxystone redustors EEC dischards beneficial ownership of the shares reported herein, except to the extent of its or her pecuniary interest therein, and the inclusion of the shares reported herein shall not be deemed an admission of beneficial ownership of such shares for purposes of Section 16 or for any other purpose.

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.