FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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Washington, D.C. 20549	OMB APPROVAL				
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-0			

OMB Number:	3235-0287							
Estimated average burden								
hours per response:	0.5							

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

Name and Address of Reporting Person* Manna Michael Edward					2. Issuer Name and Ticker or Trading Symbol ULTRALIFE CORP [ULBI]								ck all app	*		rson(s) to Is			
(Last) 2000 TE	(Fir	st) (N	/liddle)		3. Date of Earliest Transaction (Month/Day/Year) 05/03/2023						X	Office below	er (give title v) Presiden	t and	Other (s below) CEO	specify			
	NEWARK NY 14513			4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Inc Line)	·					
(3.9)	(City) (State) (Zip) Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													nded to					
		Table	I - Noi	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	3ene	ficial	ly Own	ed ———			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Date)					Executio		cution	Date,	Code (Instr.				3, 4 and Secur Benef Owne		ities For icially (D) d Following (I)		n: Direct or Indirect ostr. 4)	7. Nature of Indirect Beneficial Ownership	
										v	Amount	(A) or (D)		Price	Transa	eported ransaction(s) nstr. 3 and 4)			(Instr. 4)
ULBI Common Stock; \$.10 par value (1) 05/03/			05/03/	2023			P		1,000	A	A	\$4.01	01 11,500			D			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	med on Date, Day/Year)	Code (Instr.		of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		D S (I	Price of erivative ecurity nstr. 5)	tive derivative sy Securities		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amo or Num of Shar	ber					

Explanation of Responses:

/s/ Michael E. Manna

05/03/2023

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

^{*} 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).