

REVIV3 PROCARE CO Reported by BROWN JEFFREY B.

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 02/14/23 for the Period Ending 02/10/23

Address	901 FREMONT AVE.
	UNIT 158 AND UNIT 168
	ALHAMBRA, CA, 91803
Telephone	888-638-8883
CIK	0001718500
Symbol	RVIV
SIC Code	2844 - Perfumes, Cosmetics and Other Toilet Preparations
Industry	Personal Products
Sector	Consumer Non-Cyclicals
Fiscal Year	05/31

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

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

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

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 [*]	2.1	Issuer Name	and Ticker or	Trading Symbol	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
Brown Jeffrey B.	Re	eviv3 Proc	are Co [R	VIV]	Director 10%	owner		
(Last) (First) (Middle)	3.1	Date of Earli	est Transaction	(MM/DD/YYYY)	X_Officer (give title below) Ot		below)	
C/O REVIV3 PROCARE			2/10/20	23	Chief Operating Officer			
COMPANY, 901 S FREMONT AV	E #158							
(Street)	4.]	lf Amendmei	nt, Date Origin	al Filed (MM/DD/YYYY)	6. Individual or Joint/Group Filing	(Check Appl	icable Line)	
ALHAMBRA, CA 91803					X Form filed by One Reporting Person Form filed by More than One Reporting F	Person		
(City) (State) (Zip)								
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								
1. Title of Security (Instr. 3)	2. Trans. Date				5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership	7. Nature of Indirect	

	Execution Date, if any	(Instr. 8)					(Instr. 3 and 4)	Form:	Beneficial
								Direct (D)	Ownership
								or Indirect	(Instr. 4)
					(A) or			(I) (Instr.	
		Code	V	Amount	(D)	Price		4)	
2/10/2023		S		2,500	D	\$0.42	302,845	D	
	2/10/2023	Date, if any	Date, if any Code	Date, if any Code V	Date, if any (Instr. 3, Code V Amount	Date, if any (Instr. 3, 4 and 5) Code V Amount (A) or (D)	Date, if any Code V Amount (A) or (D) Price	Date, if any (Instr. 3, 4 and 5) (Instr. 3 and 4) Code V Amount (A) or (D) Price	Date, if any (Instr. 3, 4 and 5) (Instr. 3 and 4) Form: Direct (D) or Indirect (I) (Instr. 4)

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

1. Title of Derivate	2.	3. Trans.	3A. Deemed	4. Trans.		5. Number	of	6. Date Exer	cisable and	7. Title and A	Amount of	8. Price of	9. Number of	10.	11. Nature
Security	Conversion	Date	Execution	Code		Derivative	Securities	Expiration I	Date	Securities Un	nderlying	Derivative	derivative	Ownership	of Indirect
(Instr. 3)	or Exercise		Date, if any	(Instr. 8)		Acquired (.	A) or			Derivative Se	ecurity	Security	Securities	Form of	Beneficial
	Price of					Disposed o	of (D)			(Instr. 3 and	4)	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					(Instr. 3, 4	and 5)						Owned	Security:	(Instr. 4)
	Security												Following	Direct (D)	
								Dete	E		A			or Indirect	
								Date Exercisable	Expiration		Amount or Number of Shares		Transaction(s)	(I) (Instr.	
				Code	V	(A)	(D)	Exercisable	Date		Number of Shares		(Instr. 4)	4)	
Stock Option	\$0.09							9/1/2022 (<u>1)</u>	4/20/2022	Common	2,200,000		2.200.000	D	
(right to buy)	\$0.09							9/1/2022	4/20/2032	Stock	2,200,000		2,200,000	D	

Explanation of Responses:

(1) Options vest as follows: 25% of the original grant amount vests on September 1, 2022 and the remainder vests in 24 equal monthly installments on the first day of each month, beginning October 1, 2022.

Reporting Owners

Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Brown Jeffrey B. C/O REVIV3 PROCARE COMPANY 901 S FREMONT AVE #158 ALHAMBRA, CA 91803			Chief Operating Officer					

Signatures

75/ Jenney D. Drown 2/14/202	/s/ Jeffrey B. Brown	2/14/2023
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**Signature of Reporting Person

Date

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 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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