SEC Form 4

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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*
BAUM MARK L

(Last)	(First)	(Middle)

C/O HARROW HEALTH, INC.

102 WOODMONT BLVD., SUITE 610

(Street)

NASHVILLE	TN	37205
(City)	(State)	(Zip)

2. Issuer Name **and** Ticker or Trading Symbol

HARROW HEALTH, INC. [HROW]

3. Date of Earliest Transaction (Month/Day/Year)
01/02/2020

4. If Amendment, Date of Original Filed (Month/Day/Year)
01/06/2020

5. Relationship of Reporting Person(s) to Issuer (Check all applicable)

X Director   10% Owner

X Officer (give title below)   Other (specify below)

Chief Executive Officer

6. Individual or Joint/Group Filing (Check Applicable Line)

X Form filed by One Reporting Person

Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Option - Right to Buy	$7.3	01/02/2020		A		217,500		(1)	01/02/2030	Common Stock	217,500	$0.00	217,500	D	
Restricted Stock Unit	$0	01/02/2020		A		88,000		(2)	01/02/2023	Common Stock	88,000	$0.00	88,000	D	

Explanation of Responses:

1. Represents stock options granted under the Issuer's 2017 Stock Incentive and Awards Plan (the "Plan"). The stock options vest in equal quarterly installments over a three-year period.

2. Represents restricted stock units ("RSUs") granted under the Plan. Each RSU represents a contingent right to receive one share of common stock of the Issuer upon the vesting and settlement of the RSU. The RSUs vest and settle in full on the third anniversary of the date of grant.

Remarks:

This Form 4 amendment corrects the amount of securities "Acquired" by the reporting person which had been incorrectly described as "Disposed Of" in the originally filed Form 4.

/s/ Mark L. Baum	01/06/2020
** 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.

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.