SEC Form 4

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FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

r								
	OMB APPROVAL							
	OMB Number:	3235-0287						
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	hours per response:	0.5						

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					or Sect	ion 30(h) of the	einve	estmen	t Com	ipany Act	OT 15	940					
1. Name and Address of Reporting Person* BOLL ANDREW R.					2. Issuer Name and Ticker or Trading Symbol HARROW, INC. [HROW]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
DOLL ANDREW K.														Directo			Owner
(Last) (First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year)						7	X Officer below)	(give title	Other	(specify)			
(Last) (First) (Middle) C/O HARROW, INC.					02/07/2024								CHIE	CHIEF FINANCIAL OFFICER			
102 WOODMONT BLVD, SUITE 610				4. If Am	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Ir Line	6. Individual or Joint/Group Filing (Check Applicable .ine)				
					-									X Form f	iled by One	e Reporting Per	son
(Street) NASHV	ILLE 1	'N	37205											Form f Persor		re than One Re	porting
(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.													
		Tab	le I - Nor	n-Deri	vative Se	ecurities Ad	cqu	ired,	Disp	osed o	of, o	r Ben	eficial	y Owned	ł		
1. Title of Security (Instr. 3) Date (Month/E				saction /Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transa Code (l 8)		4. Securi Disposec 5)				Securitie Benefici Owned F	5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount		(A) or (D)	Price	Transact (Instr. 3	tion(s)		(Instr. 4)
Common stock 02/07					7/2024			M 7,400 A		\$7.71	541	,569	D				
		-				urities Acc ls, warrants								Owned			
1. Title of Derivative Security	2. Conversion or Exercise	Date Execution Date, Transaction of Exp		Date Exercisable and piration Date onth/Day/Year) 7. Title and Amount of Securities				8. Price of Derivative Security	9. Number derivative Securities	Ownersh	ip of Indirect Beneficial						

	n of Respons	06.
(Right to Buy) ⁽¹⁾	\$7.71	02/

\$7.71

or Exercise Price of

Derivative

Security

02/07/2024

Security (Instr. 3)

Stock Option

1. Represents stock options granted to Mr. Boll on February 10, 2014 under the Issuer's 2007 Stock Incentive and Awards Plan, as amended. The stock option vested quarterly over a three-year period following the grant date. The total exercise price for the options (\$57,054) was paid in cash to the Issuer by Mr. Boll.

Date

Exercisable

(1)

Expiration Date

02/10/2024



Amount or Number

Shares

7,400

of

Securities Underlying

Title

Commor

Stock

Derivative Security

(Instr. 3 and 4)

Security (Instr. 5)

\$<mark>0</mark>

Securities Beneficially

Owned

Following Reported

Transaction(s) (Instr. 4)

0

Form: Direct (D)

or Indirect (I) (Instr. 4)

D

Beneficial Ownership

(Instr. 4)

** Signature of Reporting Person

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

if any (Month/Day/Year)

8)

Code v

Μ

Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)

(A) (D)

7 400

 * 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.