SEC Form 4

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).			Filed pursua	ant to Section 16(a)	of the Se	ecurities	Exchange Act of 1		Estimated average burde hours per response:			0.5	
1. Name and Address of Reporting Person [*] <u>Stettin Glen D.</u>			2. Issuer Name and Ticker or Trading Symbol <u>MedAvail Holdings, Inc.</u> [MDVL]							ionship of Reporting all applicable) Director Officer (give title	ig Person(s) to Issuer 10% Owner le below) Other (specify below)		
(Last) (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) C/O MEDAVAIL HOLDINGS, INC. 01/06/2021 01/06/2021 6665 MILLCREEK DR. UNIT 1 01/06/2021 01/06/2021										,		, , , ,	
(Street) MISSISSAUGA	A6	4. If Amendme	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State)	(Zip)											
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned													
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	te Execution Date, onth/Day/Year) if any		3. Transaction Code (Instr. 8) (D) (Instr. 3, 4 and 5)			Disposed Of	Beneficially Own Following Report		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial
				(Month/Day/Year)	Code	v	Amount	(A) or (D)	Price	Transaction(s) (Ins and 4)	str. 3		Ownership (Instr. 4)
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)		Underlying Derivative Security (Instr.		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following	Form: Direct (D) or Indirect (I)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	Security			Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Reported Transaction(s) (Instr. 4)	(Instr. 4)	
Common Stock	\$13.27	01/06/2021		Α		14,165		(1)	01/06/2031	Common Stock	14,165	\$ <u>0</u>	14,165	D	

Explanation of Responses:

1. The shares subject to the option shall vest on the date of the Issuer's 2021 annual meeting of stockholders, subject to the Reporting Person continuing as a service provider through such date.

Remarks:

Ryan Ferguson, attorney-in-fact for Glen 01/08/2021 D. Stettin

OMB APPROVAL

3235-0287

OMB Number:

** 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).

⁴ Intervisional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78f(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.

POWER OF ATTORNEY

The undersigned, as a Section 16 reporting person of MedAvail Holdings, Inc. (the "Company"), hereby constitutes and appoints Ed Kilroy and Ry: 1. Complete and execute Forms 3, 4 and 5 and other forms and all amendments thereto as such attorney-in-fact shall in his or her discretion 2. Do all acts necessary in order to file such forms with the SEC, any securities exchange or national association, the Company and such otl The undersigned hereby ratifies and confirms all that said attorneys in-fact and agent shall do or cause to be done by virtue hereof. The under This Power of Attorney shall remain in full force and effect until the undersigned is no longer required to file Forms 3, 4 and 5 with respect IN WITNESS WHEREOF, the undersigned has caused this Power of Attorney to be executed as of this 18th day of November, 2020. Signature: /s/ Glen D. Stettin

Print Name: Glen D. Stettin