FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| | OMB APPRO | VAL | | | | | |
|---|------------------------|-----------|--|--|--|--|--|
| | OMB Number: | 3235-0287 | | | | | |
| | Estimated average burd | en | | | | | |
| l | 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

| 1. Name and Address of Reporting Person* Mannello Joseph | | | | | | | 2. Issuer Name and Ticker or Trading Symbol MYOS RENS TECHNOLOGY INC. [MYOS] | | | | | | | | | Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner | | | | | | |
|--|--|---|---------|---|--------|--|---|--------|---|--|--------------------|--|---|-------------------------------|---|---|---|-----------------------------|--|--|--|--|
| (Last) C/O MYO | | 3. Date of Earliest Transaction (Month/Day/Year) 03/27/2019 | | | | | | | | | | X Officer (give title other (specify below) Chief Executive Officer | | | | | | | | | | |
| (Street) CEDAR KNOLLS NJ 07927 (City) (State) (Zip) | | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | . Indivi ine) X | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | | | |
| 1. Title of S | | | ur) E | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Transaction Disposed Code (Instr. 5) | | | ities Acquired (A) d Of (D) (Instr. 3, 4 | | | 4 and Sec Ben Owr | | urities eficially | | nership : Direct Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership | | | | | |
| | | | | | | Code | v | Amount | (A) or (D) | | Price | ico Tra | | ansaction(s) str. 3 and 4) | | | (Instr. 4) | | | | | |
| Common | 03/27/ | 27/2019 | | | | P | | 171,23 | 33 | A \$1.4 | | .46 689,210 | | 39,210 | | 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) | tive Conversion Date Execution or Exercise (Month/Day/Year) if any | | | n Date, Trans Code | | ansaction ode (Instr. | | of | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | 8. Price Derivati Security (Instr. 5 | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Or Fo Di or (I) | o. wnership orm: rect (D) Indirect (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | Code V | | (A) | (D) | Date Exercisa | ıble | Expiration Date | Title | or | ount nber res | | | | | | | | |

Explanation of Responses:

/s/ Joseph Mannello

03/27/2019

** 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.