FORM 4

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

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL					
MB Number:	3235-0287				
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ours per response.	0.5				

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 an															
Name and Address of Reporting Person * Adams Jason			2. Issuer Name and Ticker or Trading Symbol Rennova Health, Inc. [RNVA]					5.	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director						
(Last) (First) (Middle) 400 SOUTH AUSTRALIAN AVENUE, 8TH FLOOR				3. Date of Earliest Transaction (Month/Day/Year) 05/02/2016											
(Street) WEST PALM BEACH, FL 33401 (City) (State) (Zip)				4. If Amendment, Date Original Filed(Month/Day/Year)											
		(State)									-				
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any		ate, if Co	Code (A		A) or Disposed of (D)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s)			Ownership of	Beneficial
				(Month	/Day/	/Year)	Code	e V Aı	(A) or (D)		(Instr. 3 and 4) Direct (D) or Indirect (I)		Ownership (Instr. 4)		
									ed in this for					ne .	
								form dis	ed in this for plays a curr sed of, or Beno vertible secur	ently vali	t required id OMB co			ne	
1. Title of Derivative Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	4. Transac Code	ttion	lls, warra 5. Numbe	er of e s (A) sed	form dis	splays a curr sed of, or Bend vertible secur ercisable and Date	ently vali eficially O	t required id OMB conwined and Amount lying s	8. Price of Derivative Security	9. Number Derivative Securities Beneficiall Owned Following Reported Transaction	of 10. Owners Form of y Derivati Security Direct (or Indirect)	Ownersh (Instr. 4) D) ect
Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if any	4. Transac Code	ttion	5. Number Derivative Securities Acquired or Disposof (D) (Instr. 3,	er of e s (A) sed	form dis	sed of, or Benevertible secur rrcisable and Date y/Year)	rently vali eficially O rities) 7. Title an of Underly Securities	t required id OMB conwined and Amount lying s	8. Price of Derivative Security	9. Number Derivative Securities Beneficiall Owned Following Reported	of 10. Owners Form of Derivati Security Direct (or Indire	hip of Indire Benefici Ownersh (Instr. 4)

Reporting Owners

B C O N (All	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Adams Jason 400 SOUTH AUSTRALIAN AVENUE 8TH FLOOR WEST PALM BEACH, FL 33401			Chief Financial Officer			

Signatures

/s/ Jason Adams	05/05/2016
**Signature of Reporting Person	Date

Explanation of Responses:

- * 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).
- (1) The options vest as follows: 100,000 upon date of grant, 100,000 on December 31, 2016, and 100,000 on December 31, 2017.

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

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.