FORM 4

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

OMB APPRO	/AL					
OMB Number:	3235-0287					
Estimated average burden						
nours per response	0.5					

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	s)															
1. 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 10% Owner				
400 SOU		(First) RALIAN AVE		3. Date of Earliest Transaction (Month/Day/Year) 07/17/2016							X Officer (give title below) Other (specify below) Chief Financial Officer						
(Street) WEST PALM BEACH, FL 33449				4. If Amendment, Date Original Filed(Month/Day/Year)							(ear)		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						of, or Bene	or Beneficially Owned						
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yo			2A. Deemed Execution Date, r) any (Month/Day/Ye		ate, if	3. Tran Code (Instr.		(A	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		of (D)			ed (Ownership Form:	Beneficial	
					(Year)	Cod	e V	V A	mount	(A) or (D)		insir. 3 and 4)		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common	Stock		07/17/2016				Α		16	6,667	A	\$ 0 1	68,392]	D	
			Table II -	Derivati				for	m dis Dispos	plays a	a curre or Bene	ently val	id OMB co		d unless the ber.		
1. Title of	2.	3. Transaction	3A. Deemed	e.g., put				-		rcisable			and Amount	8. Price of	9. Number o	f 10.	11. Natur
	Conversion		Execution Date, if	Transaction Derivative Ex Code Securities (M		Expir	(Month/Day/Year) Secur			of Under Securitie	nderlying perivative Security (Instr. 5)		Derivative Securities Beneficially Owned Following Reported Transaction(s)	Ownersh Form of Derivativ Security: Direct (I or Indire (s) (I)	of Indirect Beneficia Ownersh (Instr. 4)		
				Code	V	(A)	(D)	Date Exerc	isable	Expira Date	tion	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4)	
Options to Purchase Common Stock	\$ 0.30	07/17/2016		A		300,00	00	<u>(</u>	<u>(1)</u>	07/17	/2026	Commo	1300 000	\$ 0	300,000	D	

Reporting Owners

Describe Comment Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Adams Jason 400 SOUTH AUSTRALIAN AVE WEST PALM BEACH, FL 33449			Chief Financial Officer					

Signatures

/s/ Jason Adams	07/27/2016
**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 the date of grant, 100,000 on December 31, 2016, and 100,000 on December 31, 2017.

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

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.