SEC Form 4

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

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

OMB APPROV	VAL
OMB Number:	3235-0287
Estimated average burden	
hours per response:	0.5

1. Name and Address of Reporting Person * Bosua Phillip					2. Issuer Name and Ticker or Trading Symbol KNOW LABS, INC. [KNWN]								(Check	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner					
(Last) 500 UNION	(Firs	it)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 12/16/2021								X	Officer (g below)	ive title CEO and		Other (below)		
SUITE 810				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) SEATTLE														X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(Sta	te)	(Zip)																
		,	Table I - Nor	n-Deriva	tive	Securitie	es Ace	quired, I	Disp	osed o	of, or E	Benef	icially Ow	ned					
Dat				Date	Transaction ate Ionth/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dispose Code (Instr.			rities Acquired (A) or ed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported		vnership 1: Direct (D) direct (I) r. 4)	7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount	:	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock													3,005,000			D			
			Table II - E			curities Ills, warr								ed					
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)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5) Benefic Owned Followi Reporte		ve Ownersh es Form: ially Direct (D) or Indirect ng (I) (Instr. 4		Beneficial Ownership t (Instr. 4)		
				Code	v	(A)	(D)	Date Exercisab		xpiration ate	Title		Amount or Number of Shares		Transaction(s (Instr. 4)				
Option to Purchase Common Stock	\$1.28							(1)	0	8/01/2023	Com Sto		1,000,000		1,000,0	000	D		
Option to Purchase Common Stock ⁽²⁾	\$1.1							(2)	1	1/04/2024	Com Sto		1,200,000		1,200,0	00 ⁽²⁾	D		
Option to Purchase Common Stock ⁽³⁾	\$1.53							(3)	1	2/15/2025	Com Sto		4,264,395		4,264,3	95 ⁽³⁾	D		
Option to Purchase Common Stock	\$2.09	12/16/2021		A		1,300,000		(4)	13	2/15/2026	Com Sto		1,300,000	\$0	1,300,	000	D		

Explanation of Responses:

1. Option shares vest 25% quarterly over four years beginning 08/01/2018.

2. Option shares vest upon approval of the Company's blood glucose measurement technology by the U.S. Food and Drug Administration.

3. Milestone-based Option shares vest upon the Company's successful milestone achievements set forth in two Stock Option Agreements dated 12/15/2020.

4. Options vest quarterly over four years. Immediate vesting upon the occurrence of a Change-in-Control.

/s/ Phillip A. Bosua
** Signature of Reporting Person

12/20/2021

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.