

## **SECURITIES & EXCHANGE COMMISSION EDGAR FILING**

# PROVECTUS BIOPHARMACEUTICALS, INC.

Form: 4

Date Filed: 2019-03-27

Corporate Issuer CIK: 315545

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

OMB APPROVAL								
OMB Number: 3235-0287								
Estimated average burde	n 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).

#### 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 Type Re	sponses)																
1. Name and Address of Reporting Person≟ Raines Heather				2. Issuer Na PROVECTI PVCT]				_		S, INC.		Relationship of Reporting Person(s) to Issuer					
(Last) (First) (Middle) 10025 INVESTMENT DRIVE, SUITE 250				3. Date of Earliest Transaction (Month/Day/Year) 03/25/2019									Chief	Financial Office	r		
(Street)												_X_ Form filed by One	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	- No	n-D	erivative S	Securities	s Acc	uired, Disposed o	of, or Benef	ficially Owned			
1.Title of Security (Instr. 3)	y		2. Transaction Date (Month/Day/Yea	Execution Date		(Instr. 8)			4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Ownership Form:	Beneficial			
				(MOHUI/Da	iy/ i eai )	Code		٧	Amount	(A) or (D)	Price	е			or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common Sto	ck		03/25/2019			Α			50,000	Α	\$0	1,163,153			D		
Reminder: Repo	rt on a separat	te line for each class	s of securities ben	eficially owne	ed direct	tly or indire	Pe for	rsor rm a		uired to		collection of inform and unless the for				1474 (9-02)	
				- Derivative (e.g., puts,	calls, v	warrants,	optic	ons,	convertib	le securi	ities)						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	(Instr. 8)	Der Sed Acc Dis	Number of rivative curities quired (A) posed of (str. 3, 4, ar	or D)	and (Mo	Date Exerc Expiration onth/Day/Y	n Date ear)	Unde	erlying Securities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported	10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
<b>.</b>				Code	V (	(A) (I	D)	Dat Exe	ercisable D	xpiration ate	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)	(I) (Instr. 4)		
Reporting	g Owner	rs															

Danastina Ouran Nama / Addus-	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Raines Heather 10025 INVESTMENT DRIVE, SUITE 250 KNOXVILLE, TN 37932			Chief Financial Officer					

### **Signatures**

/s/ Heather Raines	03/27/2019
Signature of Reporting Person	Date

### **Explanation of Responses:**

- $^{\star}$  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.

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.

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(Print or Type Re	esponses)															
Name and Address of Reporting Person     Raines Heather								-	Symbol JTICALS	, INC.		Relationship of Reporting Person(s) to Issuer     (Check all applicable)     Director				
(Last) (First) (Middle)				Date of Earliest Transaction (Month/Day/Year)     03/25/2019									Chief	Financial Office	er	
(Street) KNOXVILLE, TN 37932										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 Acqu								uired, Disposed of, or Beneficially Owned				
1.Title of Securi (Instr. 3)	ty		2. Transaction Date (Month/Day/Yea	Execu ar) any	eemed ution Date th/Day/Yea	, if Code (Inst			4. Securiti (A) or Disp (Instr. 3, 4)	oosed of		5. Amount of Sec Following Report (Instr. 3 and 4)			Ownership Form:	Beneficial Ownership
Common Sto	ock		03/25/2019				Α		50,000	A \$	\$0	1,163,153			D	
			Table II				fo O cquired	orm a MB c		uired to mber. or Benef	respo	ollection of inform nd unless the for r Owned				1474 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year)	BA. Deemed Execution Date, i any Month/Day/Year	4. Tran if Code (Instr. 8	saction 5 E B) S	5. Number Derivativ Securitie Acquired Disposed	er of e s (A) or	6. Dand	Date Exerci Expiration onth/Day/Yo	sable Date	7. Title Under	e and Amount of dying Securities 3 and 4)		9. Number of Derivative Securities Beneficially Owned Following Reported	10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Cod	e V	(A)	(D)	Dat Exe	e E rcisable D	xpiration ate	Litle	Amount or Number of Shares		Transaction(s) (Instr. 4)	(I) (Instr. 4)	
Reportin	g Owner	'S														
Reporti	ng Owner Nam	ne / Address		Relationships												
D	r		Director 10%	0% Owner Officer					Other							

Bounding Committee (Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Raines Heather 10025 INVESTMENT DRIVE, SUITE 250 KNOXVILLE, TN 37932			Chief Financial Officer					

### **Signatures**

/s/ Heather Raines	03/27/2019
-Signature of Reporting Person	Date

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