

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

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

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

1. Name and Address of Reporting Person* <u>BOLL ANDREW R.</u> (Last) (First) (Middle) <u>C/O HARROW HEALTH, INC.</u> <u>102 WOODMONT BLVD, SUITE 610</u> (Street) <u>NASHVILLE TN 37205</u> (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>HARROW HEALTH, INC. [HROW]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner <input checked="" type="checkbox"/> Officer (give title below) Other (specify below) <u>Chief Financial Officer</u>
	3. Date of Earliest Transaction (Month/Day/Year) <u>07/18/2023</u>	
	4. If Amendment, Date of Original Filed (Month/Day/Year)	

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (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)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Common Stock	07/18/2023		M		346,500	A	(1)	670,519	D	
Common Stock	07/18/2023		F		136,350 ⁽¹⁾	D	\$18.23	534,169	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)	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)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	V	(A)	(D)	Date Exercisable	Expiration Date						Title
Performance Stock Unit	(1)	07/18/2023		M			346,500	(1)	(1)	Common Stock	346,500	\$0	0	D	

Explanation of Responses:

1. The 346,500 shares of Harrow Health, Inc. ("Harrow") common stock listed in Table I as "Acquired" represent shares issued based on vesting of performance stock units ("PSUs") granted to Mr. Boll under Harrow's 2017 Stock Incentive and Awards Plan (the "Incentive Plan") on July 23, 2021. The PSUs were settled in full (on a one-for-one basis) on July 18, 2023, following attainment of total stockholder return targets ranging from 50% - 175% following the date of the award. The 136,350 shares of Harrow common stock listed in Table I as "Disposed" were not sold by Mr. Boll in any transaction; rather, they were shares of Harrow common stock withheld by the Company for payroll tax purposes from the same aforementioned 346,500 shares pursuant to the terms of the Incentive Plan.

/s/ Andrew R. Boll 07/20/2023
 ** 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.