FORM 4

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

OMB APPROVAL
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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

1. Name and Address of Reporting Person * Maggiore Christopher D.		2. Issuer Name and Ticker or Trading Symbol Zivo Bioscience, Inc. [ZIVO]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Last) (First) 4788 NOBLES POND DR. 1	3. Date of Earliest Transaction (Month/Day/Year) 01/02/2015					_X_ Direct	or r (give title belo		10% Owner Other (specify b	elow)		
(Street) CANTON, OH 44718	4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person						
(City) (State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned					Owned					
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Code (Instr. 8)	4. Securities Acquire (A) or Disposed of (Instr. 3, 4 and 5)		of (D)	D) Beneficially Owned Following Reported Transaction(s)		Following a(s)	Form:	7. Nature of Indirect Beneficial	
		(Month/Day/Year)	Code	V	Amount	(A) or (D)	Price	or I			Ownership (Instr. 4)	
Common Stock	01/02/2015		P		29,069	A	\$ 0.0871	13,324,	831		D	
Common Stock	01/06/2015		P		10,000	A	\$ 0.0874	13,334,	831		D	
Reminder: Report on a separate li indirectly.	ne for each class of sec	curities beneficially	owned dire	ectly o	r							
	ne for each class of sec	eurities beneficially	owned dire	Pers cont	ons whained i	n this f	orm ar	e not req	ection of in uired to re	spond unl	ess	EC 1474 (9- 02)
Reminder: Report on a separate li indirectly.	Table II -	purities beneficially Derivative Securities, gainst the securities.	ies Acquir	Pers cont the f	ons whained i	n this f splays of, or B	orm ar a curre eneficia	e not req ently valid	uired to re d OMB cor	spond unl	ess	,
	Table II - ction 3A. Deemed Execution Day/Year) any	Derivative Securiti	ies Acquir arrants, op 5. Numbe	Pers cont the f ed, Di tions,	sons when ained in form distinctions of the convertage of the conv	n this f splays of, or B tible sec cisable on Date	eneficia curities) 7. T Am Uno	e not req ently valid	uired to re	spond unl itrol numb	of 10. Ownersl Form of Derivati Security Direct (l or Indire	11. Natur of Indirect Beneficia Ownersh (Instr. 4)

Reporting Owners

Boundary Committee (Additional	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Maggiore Christopher D. 4788 NOBLES POND DR. NW CANTON, OH 44718	X	X				

Signatures

/s/ Christopher Maggiore	01/08/2015
**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).

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.