FORM 4

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

OMB APPROVAL
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Estimated average burden
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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

| (Print or Type Responses) | | 1 | | | | | | | | | | |
|--|--|--|---|----------------------------|--|--------------------|---|---|--|----------------------------------|--|---------------------------------------|
| Name and Address of Reportin 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) X Director X 10% Owner | | | | | |
| (First) 4788 NOBLES POND DR. | 3. Date of Earliest Transaction (Month/Day/Year) 12/19/2019 | | | | | Office | er (give title belo | | her (specify be | elow) | | |
| (Street) CANTON, OH 44718 | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) (State) | (Zip) | T | able I - No | n-De | rivative S | ecurities | Acqui | red, Disp | osed of, or I | Beneficially O | wned | |
| 1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/ | | 2A. Deemed 3. Tra Execution Date, if Code | | tr. 8) (Instr. 3, 4 and 5) | | | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | | Following (a) Following (b) Following (c) Fo | Ownership form: Direct (D) | Beneficial Ownership | |
| | | | Code | V | Amount | (A) or (D) | Price | | | | r Indirect (i) (instr. 4) | (Instr. 4) |
| Common Stock | 12/19/2019 | | P | | 95,000 | A | \$ 0.12 | 40,243, | 997 | I |) | |
| Common Stock | 12/23/2019 | | P | | 225,125 | | \$ 0.14 | 40,469, | 469,122 | |) | |
| Common Stock | 12/24/2019 | | P | | 50,000 | | \$ 0.16 | 40,519, | 122 | I |) | |
| Common Stock | 12/26/2019 | | P | | 65,000 | _ A | \$ 0.16 | 40,584, | 122 | I |) | |
| Common Stock | 12/30/2019 | | P | | 50,000 | | \$ 0.16 | 40,634, | 122 | I |) | |
| Common Stock | 01/03/2020 | | P | | 5,000 | A | \$ 0.16 | 40,639, | 122 | I |) | |
| Reminder: Report on a separate li | ne for each class of secu | rities beneficially o | wned direc | Per | sons who | respon | | | ction of inf | ormation | | 1474 (9-02) |
| | T. 11. W | | | the | form dis | plays a d | currer | ntly valid | OMB conf | trol number. | | |
| | | Derivative Securit (e.g., puts, calls, w | | | | | ities) | | | | | |
| 1. Title of Derivative Security (Instr. 3) 1. Title of Derivative Security 2. Conversion or Exercise (Month/I Security) 3. Transa Date (Month/I Security) | Day/Year) Execution Day | Code Year) (Instr. 8) | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | and (Mo | Date Exercisable 7 and Expiration Date A Month/Day/Year) U S (1) | | Amo Undo Secu | arities (Instr. 5) Benet ftr. 3 and Follow Report Trans (Instr | | | Ownersh Form of Derivativ Security: Direct (I or Indire | Beneficial Ownership (Instr. 4) |
| | | Code V | (A) (D) | | | Expiration Date | Title | Amount or Number of Shares | | | | |

Reporting Owners

| | 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 | 01/07/2020 |
|---------------------------------|------------|
| **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.